

Application form

Legal Aid Ontario

Lawyer Inmate Request Form for Legal Aid Service

For use during COVID-19 disruptions only. This form **cannot** be used for potential Big Case Management (BCM charges).

Lawyer of choice

Name:

Phone:

Email:

Solicitor #:

Inmate information

Name:

Out of
custody/fixed
address:

Unit / apt #:

City:

Province:

Postal code:

Phone:

Email:

DOB:

Marital status:

Aboriginal self-identification

Do you self-
identify as First
Nations, Métis,
Inuit or other?

First Nations

Status

Non-status

On Reserve

Off Reserve

Métis

Registered

Non-registered

Inuit

Self-Identification of Race

Asian-East (e.g. Chinese, Japanese, Korean)	Latin American (e.g. Argentinian, Chilean, El Salvadorian)
Asian-South East (e.g. Malaysian, Filipino, Vietnamese)	Middle Eastern or North African (e.g. Egyptian, Iranian)
Asian-South (e.g. Indian, Pakistani, Sri Lankan)	Roma
Black-African (e.g. Ghanaian, Kenyan, Somali)	White-North American (e.g. American, Canadian)
Black-Caribbean (e.g. Barbadian, Jamaican)	Identified in Aboriginal Self Identifying Information above
Black-North American (e.g. American, Canadian)	Do not know
Indian-Caribbean (Guyanese with origins in India)	Not asked
Other	Prefer not to answer

Mental health issues

Yes No

Charges / legal details

Date of arrest / occurrence: Criminal defence Criminal appeal

Immigration/ Refugee (LAO staff will be following up directly by telephone)

Return date: Court location:

Bail hearing: Yes No Bail status:

Plea: Yes No Other:

Charges:

Institution:

Appeal matters

Conviction date: Has your client been sentenced: Yes No

If no, please wait for sentencing to be complete and submit request at that time

Date of sentence: Appeal of: Conviction Sentence

Responding to crown appeal? Yes No

Received a suspended sentence with probation? Yes No

Received a conditional sentence with terms? Yes No

Finished serving sentence or will complete sentence within 7 days?: Yes No

Trial lawyer name:

Appellant lawyer name:

Immigration/ Refugee matters:

Details (include type of coverage and any upcoming deadlines and/or appearances)

Financial

Funds seized:

Annual income:

OW / ODSP: Yes

No

Income source:

Own property: Yes

No

Other assets:

If employed, what is the likelihood of returning to work if released?

Unable to obtain information from the applicant

Confirmation

I _____ authorize the lawyer noted in section 1 to be my lawyer for the purposes of my Legal Aid Certificate.

I acknowledge that I am choosing my lawyer for my case. I understand that they will get a legal aid certificate and Legal Aid Ontario will pay for the services billed by the lawyer. I am prepared to work with my lawyer to manage my case.

A change of solicitor request will only be considered under extraordinary circumstances. It is expensive and costs LAO money to let you change lawyers.

Counsel, confirm with client that they agree to the terms and conditions. Verbal declaration is accepted for consent and declaration per COVID-19 disruptions. Client is advised of obligations to sign and submit consent and declaration at a later date.

Signature:

Date:

Submit by email to: InmateLawyerApp@lao.on.ca