

## Roster application: References

---

### Instructions

Please provide the names of THREE referees. Your referees should have direct and recent knowledge of your professional work. A referee should be able to provide a considered assessment about your suitability for admission to the legal aid roster based on at least one of the following general criteria:

Your professional achievements

Your reputation for ethical standards and civility

All information will be kept in confidence by Legal Aid Ontario. LAO may wish to obtain information from other sources, i.e. Exceptions Committee Members. In making these inquiries, every effort will be made to maintain confidentiality.

You may provide LAO with a reference letter from the individuals listed below. LAO may still contact the referee directly.

Some examples of eligible referees are as follows:

- Defence counsel from another firm
- Crown Attorney (Federal or Provincial)
- Provincial or Superior Court Judge
- Police officer or private investigator
- Member of charitable organization where you have volunteered
- Expert witness used in any past or present cases

None of the following persons are eligible to act as a reference:

- A person whose licence is in abeyance under subsection 31(1) of the Law Society Act;
- A partner, an associate, a co-worker, an employer or an employee of the applicant;
- A relative of the applicant;
- A member of LAO's Board;
- An employee of LAO; or
- Members of the Exceptions Committee

---

## Applicant information:

Name:

Panel being applied to:

Address:

City:

Province:

Postal code:

roster #:

LSO #:

Phone:

Fax:

Email:

---

## Reference #1

Name:

Employer:

Address:

City:

Province:

Postal code:

Phone:

Fax:

Email:

---

## Reference #2

Name:

Employer:

Address:

City:

Province:

Postal code:

Phone:

Fax:

Email:

---

## Reference #3

Name:

Employer:

Address:

City:

Province:

Postal code:

Phone:

Fax:

Email:

By selecting this box I affirm that I have read and understood the minimum requirements and that the information contained herein is complete, true and accurate. I also hereby authorize Legal Aid Ontario to make discreet inquiries with respect to my suitability and qualifications for eligibility to a legal aid roster from any source.

Signature

Date:

Please submit the completed form to the Legal Aid Ontario District Office in your district, ATTN: Director General and/or designate

Personal information contained on this form is collected under the authority of the Legal Aid Services Act, 2020 and will be used for the purpose of payment of accounts, investigations, and the administration of the Legal Aid Services Act.

Questions about this collection should be directed to the Privacy and Access to Information Officer at [fippa@lao.on.ca](mailto:fippa@lao.on.ca) or 1-800-668-8258.