Form 1: Legal Aid Application

- Please write/print legible letters and numbers and answer all questions that apply to you and your household.
- Incomplete forms may be returned.

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Email:

A	PERSONAL	INFORMATION	AND DETAILS	OF APPLICANT

- 1. Name:*
- 2. CID NO.*
- 3. Occupation Details: *
- 4. Contact No./Emergency Contact No.*
- 5. Current Address*

Village:

Gewog:

Dzongkhag:

6. Permanent Address *

Village:

Gewog:

Dzongkhag:

B. Public institutions and other relevant institutions, which facilitates the application for legal aid (if any).

Name of the Institution	Dealing Official/Staff Details (Name, Contact No., Email)
C. Total Household Income (N	[u.) *

D. Total Household Member*

E. Oath Of Declaration*

I hereby submit that the information provided above is true to the best of my knowledge and belief. I am aware that if I make false declarations, legal aid shall be denied or revoked immediately, and I shall be prosecuted as per the laws of Bhutan.

Please read carefully before you tick and check all that apply.

	I confirm that all the information I h	nave given	on this	form is	correct	and I h	ave not
de	liberately left anything out.						

I understand that if it is later found that I gave incorrect information on this form or have left out any information asked for on this form, the Center can take away my legal aid and I can be held liable for the cost of the service it provided up until that point.

I give the Center permission to obtain any details or other information about my case, which the Center might require.
I understand that the Center may contact relevant Public, Private and other institutions to obtain or verify any details of payments they make to me or any other information about means test.
If any details on this form change, I will inform the Center.
I understand that the Center may re-assess income and capital at any time while it is providing me with legal aid, until final disposition of the matter. The Center may, based on the outcome of that re-assessment, decide to withdraw my legal aid.
I shall be liable at any point of time if I have made any false declarations herein.
Affix Legal Stamp
Applicant's Signature
F. CHECKLIST OF DOCUMENTS* Please check that you have attached with your application:
1. CID or Valid Passport.
2. Details of the household members (if any, Name: Relationship: Occupation: Contact Details: Address)*.
3. Provide attachment for household income.
4. Provide attachment for household disposable capital.
5. Brief Background of the Case*. Please provide and attach a separate sheet of paper to this application specifying details of the case (covering the nature of the charge/allegation, etc., whether the case is registered in the court or police, type of legal aid required, etc.)

7. Any other documents relevant to your application such as Court Orders and

petitions (specify the description and quantity of documents attached).

6. Evidence of any form of disability.