**FORM III**

FORM OF APPLICATION FOR LEGAL ASSISTANCE

To,

The Director,

Lagos Public Interest Law Partnership (LPILP)

……………………………………………….

………………………………………………

Dear Sir/Madam,

I,………………………(Male/Female)……..........................aged…………… humbly apply for Legal Assistance/Advice. My particulars are as detailed below:-

(i) Present Address

(ii) Nature of employment

1. Average annual income from all sources
2. Nature of case in which legal Assistance/Advice is sought.

(Please attach separate sheet, if necessary, giving nature of dispute, claim or right. Attach documents in support thereof and other relevant particulars).

2. I am willing to furnish such further information as may be required for the purpose of enabling you to consider the application.

3. I am not in a position to pay for cost of engaging a legal practitioner.

1. I pray that I may be granted Legal Assistance/Advice.
2. I agree to reimburse the State Government all costs, charges and

expenses incurred by the Scheme in giving me legal assistance if the court passes a decree or order in my favour awarding costs to me or other monetary benefits or advantages or if I cease to be entitled to legal assistance under this Scheme.

1. I agree to remit 10% of the total cost, damages or other monetary compensation as may be awarded to the Pro Bono Trust Fund.
2. I state that the above statements are true to the best of my personal knowledge and belief.

Date:-

Place:- Signature of Beneficiary

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BEFORE ME

COMMISSIONER FOR OATH/NOTARY

For Office use only:

Recommended for grant of legal assistance

(1) Nature of Advice … … …

(2) Eligibility for Legal Assistance … … … Yes/No

(3) Legal Assistance … … … Granted/Refused

(4) Anticipated expenditure

(i) Court Fees … … …

(ii) Filling Fees … … …

(iii) Miscellaneous … … …

(5) Documents received … … …

(6) Lawyer appointed … … …

Name … … …

Address … … …

(7) Final result … … …

(8) Recovery of cost, if any … … …

Signature: