

## APPLICATION FOR ASSIGNMENT OF LEGAL COUNSEL

If you want to be represented in a dependency case, involuntary termination of parental rights action, support contempt proceeding, or protection from abuse contempt case but are unable to hire a lawyer because you do not have sufficient funds, you may qualify for a free attorney appointed by the Court.

### PLEASE ANSWER EVERY QUESTION COMPLETELY.

Name: \_\_\_\_\_ Age: \_\_\_\_\_

Present Address: \_\_\_\_\_  
Street City State Zip

Telephone Number: \_\_\_\_\_

Type of case: \_\_\_\_\_

Marital Status: Single \_\_\_\_\_ Married \_\_\_\_\_ Divorced \_\_\_\_\_ Other \_\_\_\_\_

Number of dependents, names and ages: \_\_\_\_\_  
\_\_\_\_\_

Are you supporting them now? \_\_\_\_\_ If so, how much per month? \_\_\_\_\_

List the value of what you own:

Cash, checking, and/or savings account: \_\_\_\_\_

Stocks, bonds, investments: \_\_\_\_\_

Real Estate (list address): \_\_\_\_\_

Vehicles (list make and year for each vehicle): \_\_\_\_\_

Money owed to you: \_\_\_\_\_

List the three most valuable items you own: 1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

TOTAL ASSETS: \$ \_\_\_\_\_

Are you employed? \_\_\_\_\_ If so, where? \_\_\_\_\_

How much do you get paid and how often? \$ \_\_\_\_\_ per \_\_\_\_\_

If you are not employed, do you receive money from:

Public Assistance: \$ \_\_\_\_\_ per \_\_\_\_\_

Unemployment: \$ \_\_\_\_\_ per \_\_\_\_\_

Worker's Compensation: \$ \_\_\_\_\_ per \_\_\_\_\_

Social Security: \$ \_\_\_\_\_ per \_\_\_\_\_

Pension: \$ \_\_\_\_\_ per \_\_\_\_\_

VA Benefits: \$ \_\_\_\_\_ per \_\_\_\_\_

Other (explain): \_\_\_\_\_ \$ \_\_\_\_\_ per \_\_\_\_\_

Loans: What bank? \_\_\_\_\_ Type of Loan: \_\_\_\_\_ \$ \_\_\_\_\_  
What bank? \_\_\_\_\_ Type of Loan: \_\_\_\_\_ \$ \_\_\_\_\_

List your monthly expenses:

Rent or house payment \$ \_\_\_\_\_  
Food \$ \_\_\_\_\_  
Utilities \$ \_\_\_\_\_  
Other (explain) \$ \_\_\_\_\_

TOTAL EXPENSES: \$ \_\_\_\_\_

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**VERIFICATION**

I am the petitioner in the above action.

I have read the foregoing petition and know the contents thereof and the same are true to my own knowledge and belief.

The statements herein are made to inform the Court as to my status of indigency and to induce the Court to assign counsel to me as an indigent party.

I ALSO HEREBY AGREE TO NOTIFY MY APPOINTED ATTORNEY OF ANY CHANGES IN MY FINANCIAL STATUS, ADDRESS, PHONE NUMBER, OR OTHER FACTS RELEVANT TO MY ELIGIBILITY.

I verify and affirm that the information set forth in this application is true and correct. I understand that any false statements set forth herein are subject to the penalties of 18 Pa.C.S.A. 4904, relating to unsworn falsification to authorities.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

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**ORDER OF COURT**

**NOW**, \_\_\_\_\_, 20\_\_\_\_, the request of the petitioner(s) for counsel without fee is granted / not granted. If granted, Attorney \_\_\_\_\_ is appointed to represent the applicant(s) interests for the specific hearing for which representation has been requested. The attorney's representation is limited to the specific proceeding and the attorney will not be required to provide further representation.

**BY THE COURT**

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