APPLICATION FOR ENGAGEMENT AS FULL TIME LEGAL AID LAWYER IN LEGAL AID DEFENSE COUNSEL SYSTEM

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Applic (For O	Photo		
	APPLICATION FOR	ASSISTANT LEGAL AID DEFENCE C	OUNSEL
1.	Applicant's Name	:	
2.	Father/Husband's Name	:	
3.	Date of Birth	:	
4.	Age (as on 31-08-2024)	:	
5.	Gender	:	
6.	Residential Address	:	
7.	Office Address	:	
8.	Chamber Address (if any)	:	
9.	Telephone no. (O)	:	
10.	Telephone No. (R)	:	
11.	Mobile No.	:	
12.	Fax No.	:	
13.	E-mail ID	:	
14.	PAN No.	:	
15.	AADHAR No.	:	

16.	Educational	Qualification	(Please	enclose	self-attested	copies of	documents):

Course	Name of Board/	Year of Passing	Obtained Percentage
	University		(aggregate)
Graduation			
Professional Degree			
LLB			
LLM			
Any other (if any)			

1/.	Date	e of Enrolment as Lawyer:			
18.	Enr	olment No. :			
	(At	tach self-attested copy of enrolment certificate issued	d by Bar Cour	ncil)	
19.	-	erience in Bar :			
	`	ration of actual practice)			
	(Atı	tach an experience certificate issued by the Bar Asso	ociation/Coun	cil)	
	(a)	Total no. of cases handled:			
	(b)	Nature of cases handled :			
		(Attach extra sheet, if required)			
	. ,	Specialization, if any :			
		(The details of a few important			
		cases, the Applicants have dealt			
		with/handled and reported			
	•	judgement if any.)			
20.		ether empanelled as Central/State Government or	:		
		rernment undertaking counsel/pleader			
	(Indi	cate period& attach documents)			
21.		Courts where the Applicant is			
	_	ularly practising :			
	(EIIC	close Bar Association Membership Certificate)			
22.	Spe	cify whether earlier remained on the			
	pan	el of HCLSC/DLSA or TLSC :			
		cate period, number of legal aid cases handled& result)			
22	•	ch documents)			
23.		Whether any disciplinary case/Complaint is/was	YES	NO	
	_	nst the Applicant with any Bar Council: es, specify details of both disposed & pending with documents)	163	NO	
	-	Whether any Police Case/FIR is registered			
		inst the Applicant in any Police Station	YES	NO	
	_	es, specify details of both disposed & pending with documents		1,0	
24.		of the documents to be attached.			
	1.	Self-Attested copy of Certificates in support of educat	ional qualificat	tions.	
	2.	Self-Attested copy of Certificate in Enrolment issued	l by the Bar C	ouncil under	
		the Advocates Act, 1961.			
	3.	Experience Certificate			
	4. -	1			
	5.	Self-Attested copy of Photo Identity Card, Address Pr			
	6.	Self-Attested copy of ITR for last 3 years (if available).		

DECLARATION

I hereby declare that all the statements made in this application are true, complete and correct to the best of my knowledge and belief. In the event of any information being found false/incorrect at any stage, my candidature is liable to be cancelled. I have read and understood the instructions and terms of the engagement and agrees to abide by those. I declare that I fulfil the eligibility conditions for the category to which I am seeking engagement. I declare that I have never been penalised by any Bar Council in any Disciplinary Proceedings. I declare that I am not convicted of any offence & no criminal case/except the case the details of with are produced by me is/are filed against me. I also undertake to maintain absolute integrity and discipline as required there under. I agree with the remuneration structure and all the terms and conditions notified by SLSA/DLSA concerned.

	(Signature)
Place:	
Date:	