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

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AP	PLICATION FOR CH	IEF/DEPUTY/ASSI	STANT LEGAL AID I	DEFENSE COUNSEL	
1.	Applicant's Name	;			
2.	Father/Husband's Nam	e :			
3.	Date of Birth	:			
4.	Age (as on 01-08-2022	) :			
5.	Gender	*			
6.	Residential Address				
7.	Office Address	•			
	*				
8.	Chamber Address (if an	ny) :			
9.	Telephone no. (O)				
	Telephone No. (R)	•			
	Mobile No.	•			
	Fax No.				
	E-mail ID	•			
	PAN No.				
	AADHAR No.	•			
		on (Please enclose se	If-attested conies of docu	iments):	
	. Educational Qualification (Please enclose self-attested copies of documents):				
	Course	Name of Board/	Year of Passing	Obtained Percentage	
		University	3	(aggregate)	
	Graduation	1			
ſ	Professional Degree				

Course	University	real of Fassing	(aggregate)
Graduation	*		
Professional Degree			
LLB			
LLM			
Any other (if any)			
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17	Date	of En	rollin	ent a	c l av	MAIN
1 / .	Date	OI $DII$	LOHIII	CIII a	SLAN	VCI.

18. Enrollment No.

(Attach self-attested copy of enrollment certificate issued by Bar Council)

19. Experience in Bar :
(Duration of actual practice)
(Attach an experience certificate issued by the Bar Association/Council)
(a) Total no. of cases handled:
(b) Nature of cases handled :
(Attach extra sheet, if required)
(c) Specialization if any

(c) Specialization, if any
(The details of a few important cases, the Applicants have dealt with/handled and reported judgement if any.)

20. Whether empanelled as Central/State Government or Government undertaking counsel/pleader (Indicate period& attach documents)

21. The Courts where the Applicant is regularly practising (Enclose Bar Association Membership Certificate)

22. Specify whether earlier remained on the panel of HCLSC/DLSA or TLSC : (Indicate period, number of legal aid cases handled& result) (attach documents)

23. a) Whether any disciplinary case/Complaint is/was
against the Applicant with any Bar Council: YES
(If yes, specify details of both disposed & pending with documents)
b) Whether any Police Case/FIR is registered
against the Applicant in any Police Station
(If yes, specify details of both disposed & pending with documents)

- 24. List of the documents to be attached.
  - 1. Self-Attested copy of Certificates in support of educational qualifications.
  - 2. Self-Attested copy of Certificate in Enrollment issued by the Bar Council under the Advocates Act, 1961.
  - 3. Self-Attested copy of Photo Identity Card, Address Proof.
  - 4. Self-Attested copy of ITR for last 3 years (if available).
  - 5. Photo copies of judgments in 5 Sessions cases, represented as Defense lawyer, (for the post of Chief/Deputy Legal Aid Defense Counsel).
  - 6. Photocopies of at least 5 cross examinations in Sessions cases (for Chief/Deputy Legal Aid Defense Counsel).

(Signature)

## **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 thereunder. I agree with the remuneration structure and all the terms and conditions notified by SLSA/DLSA concerned.

		(Signature)
Place:		
Date:		