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

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AI	PPLICATION FOR CH	HEF/DEPUTY/ASS	ISTANT LEGAL AID	DEFENSE COUNSEL
1.	Applicant's Name	a tura rekibiya Cawa Baranes wa		
2.	Father/Husband's Nan	ne :		
3.	Date of Birth	:		
4.	Age (as on 01-08-2022	2) :		
5.	Gender			
6.	Residential Address			
7.	Office Address			
8.	Chamber Address (if an	ny) :		
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9. 10.	Telephone no. (O)	the first of the property w		
10.	Telephone No. (R) Mobile No.	•		
	Fax No.	a three standards		
	E-mail ID	an fire discusses in my		
	PAN No.	PEASEUMCHE IN EN		
	AADHAR No.	3.501		
	Educational Qualification	: on (Please enclose se	If-attested copies of doc	uments):
	Course	Name of Board/	Year of Passing	Obtained Percentage

Course	Name of Board/ University	Year of Passing	Obtained Percentage
Graduation	a Cament	THE STATE OF THE S	(aggregate)
Professional Degree			
LLB			
LLM			TV Incomment
Any other (if any)			1 - Con-10-3

- 17. Date of Enrollment as Lawyer:
- 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 (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. 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)
- 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)

NO