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

STAT	E			
DISTE	RICT			
	cation No Office use)			Photo
AP	PLICATION FOR CHI	EF/DEPUTY/ASSIS	STANT LEGAL AID I	
1.	Applicant's Name	:		
2.	Father/Husband's Name	:		
3.	Date of Birth	:		
4.	Age (as on 01-08-2022)	:		
5. 6.	Gender Residential Address	:		
7.	Office Address	:		
8.	Chamber Address (if any	y) :		
9.	Telephone no. (O)	:		
10.	Telephone No. (R)	:		
11.	Mobile No.	:		
12.	Fax No.	:		
	E-mail ID	:		
	PAN No.	:		
	AADHAR No.	:		
16.	Educational Qualification	on (Please enclose sel	f-attested copies of doc	uments):
	Course	Name of Board/	Year of Passing	Obtained Percentage
			•	1 /

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

17.	Date	of	Enrol	lment	as	Lawy	er:
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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 NO				
(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 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:	