**LEGAL AID FORM**

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|  |  FULL NAME (In capitals, as written in your official document): |
|  |
| **1.** | DATE OF BIRTH: | ……./……./……….. | PLACE OF BIRTH:  |  |
| **2.** | ADDRESS: |  |
| **3./****4.**  | ID/ PASSPORT & ALIEN BOOK(specify which) |   | NATIONALITY: |  |
| **5.** | SOCIALSECURITY no.: | **6.** | OCCUPATION: |  |
|  | ADDRESS: |  |
| **7.** | SALLARY & OTHER BENEFITS FROM OCCUPATION: |  |
| **8.** | OTHER INCOME:(specify) |  |
| **9./10.**  | IMMOVABLE PROPERTY REGISTERED OR THAT COULD BE REGISTERED TO MY NAME (specify which) |  |
| **11.** | OWNED MOTOR VEHICLES: |  |
| **12.** | DEPOSITS INBANKS: |  |
| **13.** | DEBT TOWARDSCREDITORS: |  |
| **14.** | FAMILY SITUATION (If married: 1. Name, age, income and property situation of spouse/ 2. Name(s) and age(s) of child(ren)/ 3. Rent for family/individual residence | If unmarried put a dash): |
| Spouse | Children | Rent |
|  |  |  |
| **15.** | I am dependent on my family (Write details for every member of your family that you are dependent to, including income, movable and immovable property, owned motor vehicles, deposits and debt): |
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