

Legal Aid ACT

LEGAL AID ACT GENERAL PANEL APPLICATION FOR MEMBERSHIP

I
(Full Name)

of
(Name of Law Firm)

apply to become a member of the Legal Aid ACT General Panel.

1. I confirm that:

- a) I am a private legal practitioner as defined in the *Legal Aid Act 1977*;
- b) I have in place an adequate supervisory system for employed solicitors who may undertake legal aid work on my behalf;
(A separate application needs to be completed for each principal in a practice who supervises such employees, however practice details 2 f) -i) need only be completed once for each practice.)
- c) I have signed the attached copy of the Legal Aid ACT General Panel Services Agreement and agree to comply with its conditions including the Practice Standards and the Compliance Audit Requirements.

2. My practice details are:

- a) business name:
- b) mobile:
- c) telephone: ()
- d) email:

(the following need only be completed once for each practice)

- e) postal address:
..... Postcode:

f) ABN:

g) Registered for GST (please circle): yes no

h) financial institution details (for receipt of payments from Legal Aid ACT):

- Name of institution:
- BSB:
- Account Name:
- Account Number:

3. The following employed solicitors may undertake legal aid work on my behalf:

Given name and Surname	Contact Email

4. Areas of practice/specialty (although this is a general panel this information will assist us in allocating work):

- Family** (Parenting and Property)
- Care & Protection**
- Criminal** (CC, MC, SC)
- Family Violence & Protection Orders**
- Civil** (ACAT/AAT)
- NDIS Appeals**
- Migration**
- Family Violence Cross Examination of Parties Scheme (S102NA)**
- Other:**

Dated this: day of 2024

Signed

Please note you will be advised of the outcome of your application within 28 days of receipt of this application by Legal Aid ACT.