

INSTRUCTIONS CHECKLIST

YOUR DETAILS

Surname _____ First Name _____

Address _____

Suburb _____ Postcode _____

Postal address (if different from above) _____

Telephone (H) _____ (W) _____ (M) _____

Email _____

Occupation _____

Date of birth _____ Place of birth _____

If born outside of Australia, year first entered Australia _____

Citizenship _____

Any other names you have been known by _____

How did you find out about us ? _____

Are you Aboriginal and/ or Torres Strait Islander Origin? Yes No

Do you need assistance with speaking English? Yes No

OTHER PARTY DETAILS

Name _____

Address _____

Suburb _____ Postcode _____

Telephone (H) _____ (W) _____ (M) _____

Email _____

Occupation _____

Date of birth _____ Place of birth _____

If born outside of Australia, year first entered Australia _____

Citizenship _____

Any other names they have been known by _____

Name of lawyers _____

MARRIAGE / COHABITATION DETAILS

Date of cohabitation _____

Date of marriage _____ Place of marriage _____

Date of final separation _____ Dates of previous separations _____

Date of divorce _____ Place of divorce _____

CHILDREN'S DETAILS

Full name _____ Full name _____

Date of birth _____ Date of birth _____

Place of birth _____ Place of birth _____

Resides with _____ Resides with _____

Full name _____ Full name _____

Date of birth _____ Date of birth _____

Place of birth _____ Place of birth _____

Resides with _____ Resides with _____

YOUR MATTER

What is your matter concerning?

- Children's Issues Property Settlement Domestic Violence Order
 Will Power of Attorney Other _____
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LEGAL AID QUEENSLAND

Are you applying for Legal Aid funding? Yes No

Have you received a grant of Legal Aid funding? Yes No

PREVIOUS COURT ACTIONS

Are there any previous court orders? (please provide copies) Yes No
