REQUEST FOR GRANT/EXTENSION OF ASSISTANCE
Indictable Crime Matter

Victoria Legal Aid
Lawyers And Legal Services

Name of Applicant:_____**Your reference**_____

Simplified Grants Process

☐ A grant of assistance is sought to appear on behalf of the above named client whose application for legal assistance is attached.

☐ I seek an extension of assistance on file VLA Ref: _____

This section must be completed

Court: _____at _____ Date of Hearing: _____

Charges: _____

Are there Co-accused ☐Yes ☐No Acting for co-accused: ☐ Yes ☐ No

Names of all Co-accused: _____

(Please attach a further sheet If insufficient space)

1. RECOMMENDATION (Part A and Part B must be completed. Complete Part C only if relevant)

PART A: Relevant Guideline **NOT including Serious Sex Offenders (Detention and Supervision) Act 2009**

The relevant guideline is:

☐ State Committal Proceedings ☐ Commonwealth Committal Proceedings

☐ State Trials ☐ Commonwealth Trial

☐ Bail (State) ☐ Bail (Commonwealth)

☐ Application under s143 Confiscation Act (State)

PART B: Solicitor Recommendation

☐ In my opinion the application **meets** the requirements of the relevant guideline and I recommend that assistance be granted. All required substantiating documentation and information is on file. I have informed my client of this recommendation.

☐ In my opinion the application **does not meet** the requirements of the relevant guideline and I recommend that assistance be refused. All required substantiating documentation and information is on file. I have informed my client of this recommendation.

☐ In my opinion the application **does not meet** the requirements of the relevant guideline. However, the matter has **merit within the meaning of Parts 12 / 13 of the VLA Handbook** and **special circumstances may apply.** I enclose all relevant documents so that the application may be considered by VLA. I have informed my client of my views.

☐ The applicant has failed to provide adequate and/or current documentary proof of their income and assets and/or that of any financially associated person. **I recommend that assistance be refused**. I have informed my client of this recommendation.

PART C: Disbursements

☐ I recommend that assistance be granted at the standard fees for the disbursement/s referred to in section 2 overleaf.

☐ I seek that assistance be granted at a special fee for the disbursement/s referred to in section 2 overleaf and attach details including anticipated costs for VLA's consideration.

☐ I seek that assistance be granted for a disbursement not referred to in section 2 overleaf and attach details including anticipated costs for VLA's consideration.

2. ASSISTANCE SOUGHT (tick all relevant boxes)

Professional Costs

Application under s143 *Confiscation Act 1997*

☐ County ☐ Supreme Court

Bail Application – complex

☐ Magistrates' ☐ County ☐ Supreme Court

☐ Magistrates Court stage (incl. Committal Mention & Negotiations)

☐ Contested Committal

☐ One day ☐ Two days (maximum)

☐ Limited committal – Sexual Offence Case

Preparation (incl. plea if appropriate)

☐ County Court ☐ Supreme Court

Trial

☐ County Court ☐ Supreme Court

Number of Days: _____

☐ Additional days for Trial - No. of Days: _____

☐ Other hearing (details attached)

Disbursements

☐ Medical report – Doctor (up to $200)

☐ Medical report – Hospital (up to $280)

☐ Psychologist ☐ Psychiatric

☐ Supplementary

☐ Treating

☐ New Assessment

☐ New Assessment including Gaol visit

☐ Evidentiary

☐ Witness expenses (Table P)

☐ ½ day ☐ full day

☐ Other Disbursements - attach details including: it's relevance, how it's necessary, the cost benefit and the anticipated costs

3. MEANS (tick one box only)

☐ I certify that I have the required current documentary proof of my client's income and assets **and/or** that of any financially associated person and that those documents substantiate the financial information given by my client in their application for legal assistance.

☐ My client instructs that s/he is on Centrelink benefits and I have obtained his/her authorisation to obtain proof of benefits from Centrelink. I will not render an account until that proof is obtained. I am aware that I am required to render a final account within 30 days of completion of the matter.

Waivers of Proof of Means apply to applicants only. Financial documentation must be obtained from financially associated persons.

☐ No proof of income or assets is required as my client is in custody, has declared assets less than $865, and has no Financially Associated Person

☐ s/he is in custody, has no Financially Associated Person, and this application relates to a bail application

I acknowledge that under section 44(1) of the Legal Aid Act the provision of a false statement or a failure to disclose relevant information renders me liable to the penalties therein contained, and to action by VLA to remove me and my firm from the Simplified Grants Process and/or the referral panel maintained under section 30 of the Legal Aid Act.

SIGNATURE: _____ DATE: _____

PRINT PRACTITIONER'S NAME:_____

Name & address of firm: _____

Solicitor's reference: _____