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

STA	TE	- <u>C</u>	HHATT	<u>ISGARH</u>		
DIST	TRICT	2 14		700:31		
	ication No. Office use)	-				
d	APPLICATI	ION FOR		TY/ASSIST COUNSEL		AID DEFENSE
1.	Applicant's Name			:		
2.	Father/Husband's Name		ne	:		
3.	Date of Birth			:		
4.	Age (as on 01-08-2022)		2)	3		
5.	Gender			:		
6.	Residential	Address		:		
7.	Office Adda	ress		4		
8.	Chamber A	ddress (if	any)			
9.	Telephone 1	No. (O)		3		
10.	Telephone !	No. (R)		3		
11.	Mobile No.				12-	
12.	Fax No.			÷		
13.	E-mail ID			:		-
14.	PAN No.			:		
15.	AADHAR No.			:		

16. Educational Qualification (Please enclose self-attested copies of documents):

Cou	Course		Name of Board/ university	Years of Passing	Obtained Percentage (aggregate)	
Gra	duatio	n				
Prof LLB		al Degree				
LLM	1					
Any	other	(if any)				
17.	Date	of Enrolm	ent as Lawyer	:		
18.	Enrolment No. : (Attach self-attested copy of enrolment certificate issued by Bar Council)					
19.	. Experience in Bar :				Bar Association/Council	
	(a)	Total No	. of cases Handled	: _		
	(b)		f cases handled extra sheet, if requir	:		
	(c)	(The deta Cases, th	ation, if any ails of a few importe e Applicants have o dled and reported at if any.)			
20.	Whether empanelled as Central/ State Government or Government undertaking counsel/pleader			: =		
21.	The	Courts whe	ere the Applicant is	(2)		

22.	Specify whether earlier remained on : the panel of HCLSC/DLSA or TLSC (Indicate period, number of legal aid cases handled & result)(Attach document)					
23.	Whether any disciplinary case/ : YES NO Complaint is /was against the Applicant with any Bar Council (If yes specify details of both disposed & pending with document)					
24.	List of the documents to be attached.					
	 Self-Attested copy of Certificates in support of educational qualifications. 					
	Self-Attested copy of Certificates in Enrollment issued by the Bacouncil under the Advocates Act, 1961.					
	Self-Attested copy of Photo Identity Card, Address Proof.					
	Self-Attested copy of ITR for last 3 years (if available).					
	 Photo Copies of judgments in 20 Sessions cases, represented as Defense Lawyer, (for the post of Deputy Legal Aid Defense Counsel). 					

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 agree to abide by those. I declare that I fulfill the Eligibility conditions for the category to which I am seeking engagement. I declare that I have never been penalized by any Bar Council in any Disciplinary Proceedings. I also undertake to maintain absolute integrity and discipline as required there under. I agree with the remuneration structure and all the terms and conditions notified SLSA/DLSA concerned.

Place:	
Date :	(Signature)