

WHAT YOU NEED TO KNOW BEFORE GETTING STARTED:

DEADLINES

Processing your application will take at least two weeks. Please note also that *Pro Bono Québec* must receive your application and any other relevant information at least eight weeks before the date of any hearing or deadline related to your file.

DECISION

If your application is turned down, *Pro Bono Québec* is not obligated to justify its decision. To reach a decision, *Pro Bono Québec* may ask you to provide additional information and documents, in particular regarding the financial situation of the business, organization or association. A request for additional information does not mean that your application has been accepted. You will be notified in writing of the decision.

FEES

The legal services provided by the lawyer referred to you by *Pro Bono Québec* are free. However, you must pay *Pro Bono Québec* a \$20 non-refundable fee for processing your application and pay all other costs related to your file (e.g., “court stamps”, experts’ fees, etc.).

YOUR RESPONSIBILITIES

Until you sign an agreement for professional services (mandate) with a lawyer referred to you by *Pro Bono Québec*, you must take steps to protect your rights. These steps include responding to any requests by a court, meeting any court deadlines and doing whatever is necessary to ensure your rights are not lost due to the passage of time (prescription). If your application is accepted, you must give instructions to the lawyer about what to include in the professional services agreement.

NATURE OF THE SERVICES RENDERED

Pro Bono Québec does not give legal advice and there is no lawyer-client relationship between you and *Pro Bono Québec*. If your application is accepted, you will have a lawyer-client relationship with a lawyer referred by *Pro Bono Québec* and not with *Pro Bono Québec* itself.

FILL OUT ALL SECTIONS. SUBMITTING AN INCOMPLETE FORM MAY DELAY OR EVEN PREVENT THE PROCESSING OF YOUR APPLICATION.

THIS APPLICATION IS MADE ON BEHALF OF:

A business

An organization

An association

1. NAME AND CONTACT INFORMATION

A

Business, organization or association

Name (block letters): _____

Main activities: _____

Address: _____

City: _____ Postal code: _____

Telephone number: _____ Fax: _____

E-mail: _____

B

Person filing the application on behalf of the business, organization or association

Name (block letters): _____

Title: _____

Personal address: _____

City: _____ Postal code: _____

Telephone number: _____ Fax: _____

E-mail: _____

2. ELIGIBILITY FOR LEGAL AID

Not-for-profit organizations and associations eligible for legal aid do not qualify for the services of a lawyer referred by ***Pro Bono Québec***.

To find out if the organization or association is eligible for legal aid, contact a Legal Aid Office or Community Legal Centre in your area or consult the website of the Commission des services juridiques (www.csj.qc.ca).

Choose the box that applies:

- This application is made on behalf of a business.
- The members of the association or organization are not eligible for legal aid.
- The request for legal aid by the association or organization was refused.
- Legal aid was withdrawn from the association or organization.

If you chose one of the last two boxes, you must provide a copy of the notice of refusal or withdrawal of legal aid. (See Section 14.)

3. SERVICES REQUIRED

Indicate why you need the services of a lawyer referred by *Pro Bono Québec*:

- Advice
- To be represented in court
- Help with mediation
- Other (please specify) _____

4. STATUS OF YOUR FILE

Is your file already before a court or tribunal?

- Yes (*Fill out the section below.*)
- No (*Go to Section 5.*)

Name of the court or tribunal: _____

Court or tribunal case number: _____

District: _____

Names of all the parties (including the business, organization or association)

Plaintiff / Petitioners	Defendants / Respondents / Third Parties
1. _____	1. _____
2. _____	2. _____
3. _____	3. _____
4. _____	4. _____

Date and time of the hearing, if known Date: DD / MM / YYYY Time: _____

Number of days scheduled, if known: _____

5. DEADLINES

List all deadlines relating to your file:

Deadline	Action to be taken by this date	Do you need legal services for this step of the process?
<u>DD / MM / YYYY</u>	_____	_____
<u>DD / MM / YYYY</u>	_____	_____
<u>DD / MM / YYYY</u>	_____	_____
<u>DD / MM / YYYY</u>	_____	_____

6. ASSISTANCE CURRENTLY BEING RECEIVED

Is the business, association or organization for which you are filing this application currently being assisted by a lawyer or advocacy organization?

Yes (Fill out Sections A and B.)

No (Go to Section 7.)

A

Name of the contact person or lawyer: _____

Organization or firm: _____

Address: _____

City: _____ Postal code: _____

Telephone number: _____ Fax: _____

E-mail: _____

B

If your **Pro Bono Québec** application is accepted, will this lawyer or advocacy organization continue to act for the business, association or organization regarding this matter?

Yes

I don't know

No (explain why) _____

7. ASSISTANCE RECEIVED IN THE PAST

Has the business, association or organization for which you are filing this application been assisted in the past by a lawyer or advocacy organization regarding this matter?

If there are several lawyers or organizations, use a separate piece of paper to provide the information listed below for each lawyer or organization.

Yes (Fill out Sections A and B.)

No (Go to Section 8.)

A

Name of the contact person or lawyer: _____

Organization or firm: _____

Address: _____

City: _____ Postal code: _____

Telephone number: _____ Fax: _____

E-mail: _____

B

When was the lawyer or organization involved?

From: _____ To: _____

Why is the lawyer or organization no longer involved? _____

12. EXPENSES

Provide details of expenses based on the most recent audited financial statements. If they are not available, attach a balance sheet or prepare an estimate based on the current financial year of your business, association or organization.

Type of expenses	Amount
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

13. SAVINGS, INVESTMENTS AND MAJOR ASSETS

Provide details of any savings, investments or other major assets owned by the business, association or organization (e.g., cash, real estate, vehicles, shares, etc.).

Type of savings / investments / assets	Value
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

14. DOCUMENTS

List the copies of documents you are attaching to your application:

- Notice of refusal or withdrawal of legal aid, if applicable
- Any document issued by a court or tribunal
- Any document from a lawyer in connection with the file
- Any relevant correspondence with a person involved in the file
- Audited financial statements or balance sheet
- Any other important document related to the file (e.g., defence, motion, expert's report)
- A list of other relevant documents not sent with the application

15. DECLARATION, RENUNCIATION AND AUTHORIZATION

I declare that the information in this application is, to the best of my knowledge, accurate and complete.

I, personally and as an authorized representative of the business, organization or association, will not hold **Pro Bono Québec**, its employees, partners and volunteers responsible for anything that occurs in connection with this application.

I, personally and as an authorized representative of the business, organization or association, authorize **Pro Bono Québec** to:

- Provide this application and accompanying documents to its employees, partners and volunteers
- Consult the court file, if there is one
- Contact any person or organization mentioned in this application, accompanying documents or the court file
- Keep this application and accompanying documents

Signature _____

Date DD / MM / YYYY

WHAT TO DO WITH YOUR COMPLETED APPLICATION

Send the completed form, your \$20 payment (cash or cheque made to the order of *Pro Bono Québec*) and a copy of the documents mentioned in Section 14 to:

Pro Bono Québec
P.O. Box 55043, RPO Notre-Dame
11 Notre-Dame Street West
Montreal, Quebec H2Y 4A7

Do not send original documents, as they will not be returned.

Keep a copy of the completed form for your records.