[translated from original Greek text]

**FORM 1**

THE LEGAL AID

PROCEDURAL REGULATION (No. 1) OF 2003

THE LEGAL AID LAW OF 2002 (L.165(1)/2002)

APPLICATION FOR FREE LEGAL AID

Application number ………………….

Full name of applicant ……..……………………………………………………………………..

Address of applicant ……………………………………………………………………………………………………..

**Procedure for which the application is submitted (set out full details)**:

*...............................................................................................................................................................................................................................................................................................................................................*

**Type of Legal Aid for which the application is submitted:**

................................................................................................................................................................................................................................................................................................................................................

Signature ………………………………………………..

Filed on ………………………………………………………………………………... in the ……………………………. Court

Your application will be examined on ……………..………………………..…………….……………….................

at ............. (time) before the .................................................................. (state the Court)

……………………………………………

Signature of the Registrar [translated from original Greek text]

**FORM 2**

THE LEGAL AID

PROCEDURAL REGULATION (No. 1) OF 2003

THE LEGAL AID LAW OF 2002 (L.165(1)/2002)

WRITTEN STATEMENT OF APPLICANT FOR LEGAL AID

Application No.: ……………..

I, the undersigned … …..…………………………...……applicant in the application for free legal aid number …………………, filed in the Register of the

(please state the Court), hereby state the following:

1. Date and place of birth:
2. Residential Address:
3. Identity Card Number (**for Cypriots**): -
4. Nationality and passport number (for foreigners):
5. Social Insurance Number:
6. Occupation and address of work:
7. Remuneration and other benefits from employment:
8. Other income:
9. Immovable property registered in the name:
10. Immovable property for which I am entitled to be registered as owner:

1. Privately owned motor vehicles:
2. Deposits in banks or other institutions:
3. Debts by creditor:
4. Family composition (state full name of spouse, names and ages of children, rent payable for housing, remuneration and financial status of spouse):

1. I am a dependent member of the family, as follows: (set out details of every member of the family on whose income you are dependent, who receive a salary from an occupation, other income, immovable property, motor vehicles, deposits, debts)

1. Other useful information:

………………………………………

Signature (Applicant)

Filed on ……………………..in the ………………….. Court

………………………………………

Signature (Registrar)