

# **Madison County Assigned Counsel Program, Application for Assignment of Counsel**

**\*Eligibility is determined by answers. Please answer all questions the best you can\***

## **Client Information:**

Name: \_\_\_\_\_

Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Sex: M or F

Mailing Address: \_\_\_\_\_

E-Mail Address \_\_\_\_\_ Phone Number: \_\_\_\_\_

Do you speak English? \_\_\_\_\_ Marital Status: \_\_\_\_\_

What City and Country were you born in? \_\_\_\_\_

Number of dependents in household: \_\_\_\_\_ (Include minors under the age of 26, adults who are caregivers, elderly or disabled)

## **Client Financial Information:**

Do you receive any of the following: (circle all that apply) Public Assistance SSI/SSDI - Food Stamps - Medicaid

Occupation: \_\_\_\_\_ Name of Employer: \_\_\_\_\_

Address of Employer: \_\_\_\_\_

Amount of Net (take home) Pay \$ \_\_\_\_\_ per Weekly Bi-Weekly Month Year (circle one)

Current balance for Checking Account(s): \_\_\_\_\_ Savings Account(s): \_\_\_\_\_

Workers Comp: \_\_\_\_\_ Unemployment Benefits: \_\_\_\_\_

VA Benefits: \_\_\_\_\_ Pension: \_\_\_\_\_ 401K/Stocks/Bonds (Value): \_\_\_\_\_

Do you own your home? YES or NO Current Market Value: \_\_\_\_\_ Amount Owed: \_\_\_\_\_

Vehicle(s) Owned: \_\_\_\_\_ Current Market Value: \_\_\_\_\_ Amount Owed: \_\_\_\_\_

**Monthly Expenses:** Food \$ \_\_\_\_\_ Rent/Mortgage \$ \_\_\_\_\_ Car Payment \$ \_\_\_\_\_

Utilities (heat/internet/electric, etc.)\$ \_\_\_\_\_ Child Care/Support \$ \_\_\_\_\_ Medical Bills \$ \_\_\_\_\_

Credit Card/Installment Debts \$ \_\_\_\_\_ Tuition/Education Costs \$ \_\_\_\_\_ Alimony \$ \_\_\_\_\_

**Client Signature:** \_\_\_\_\_

## **ATTORNEY/COURT INFORMATION:**

Counsel (filling out this form) \_\_\_\_\_ ADA \_\_\_\_\_

Today's Date: \_\_\_\_\_ Date Charged: \_\_\_\_\_ Case/Docket # \_\_\_\_\_

Court: \_\_\_\_\_ Judge: \_\_\_\_\_

Charges: \_\_\_\_\_ Next Court Date: \_\_\_\_\_

Appearance Notes/Disposition: \_\_\_\_\_

## **Custody/Bail Status:**

ROR: \_\_\_\_\_ JAIL: \_\_\_\_\_ Remanded Without Bail: YES or NO

Cash \$ \_\_\_\_\_ Bond \$ \_\_\_\_\_

**Screener:** \_\_\_\_\_ **Client is:** Eligible or Not Eligible