



Montana Legal Services Association Application for Assistance

Complete the application to the best of your ability. All the information you provide in this application is private. We will not share without your permission.

What type of legal problem do you need help with? Check all that apply.

- | | | |
|---|--|--|
| <input type="checkbox"/> Custody/Parenting | <input type="checkbox"/> Human Trafficking | <input type="checkbox"/> Eviction |
| <input type="checkbox"/> Divorce | <input type="checkbox"/> Tax Issues | <input type="checkbox"/> Security Deposit |
| <input type="checkbox"/> Emancipation | <input type="checkbox"/> Employment | <input type="checkbox"/> Housing Voucher |
| <input type="checkbox"/> Minor Guardianship | <input type="checkbox"/> Money Problems | <input type="checkbox"/> Foreclosure |
| <input type="checkbox"/> Victim of Crime | <input type="checkbox"/> Public Benefits | <input type="checkbox"/> Indian/Tribal Law |

Applicant Information

Name of Applicant: _____ **Date:** _____

Other names you have gone by: _____

Date of Birth: _____

Contact Information

Preferred Phone Number: _____ Cell Home Other: _____

Safe to Call?: YES NO

Safe to Text?: YES NO

Safe to Leave Voicemail?: YES NO

Email Address: _____ Safe to email?: YES NO

Mailing Address: _____ Safe to mail?: YES NO

City: _____ **ZIP:** _____ **County of Residence:** _____

County of Dispute (where court case is or would be filed): _____

Preferred language, if other than English: _____

Adverse Party Information

The adverse party is the person or organization this dispute is against. Common adverse parties include spouses (divorce), co-parents (custody), landlords (eviction), or financial Institutions/creditors (collections).

Name: _____ **Date of Birth (if known/applicable):** _____

Additional adverse parties or other names used by adverse: _____



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Citizen Attestation

Are you a citizen of the United States? YES or NO (if yes, sign below)

I attest that I am a citizen of the United States

Signature: _____ Date: _____

Legal & Miscellaneous Questions

Do you have an attorney currently helping you with this matter?: YES NO

If you have been served court papers, what date were you served?: YES NO

Did you file a response or answer with the court?: YES NO

Do you have a deadline or court date scheduled in the next 14 days?: YES NO

If yes, when is the date and what is happening on that date?: _____

Are you a survivor of Domestic Violence related to this legal matter?: YES NO

Are you a Veteran or Active Service Member?: YES NO

Is this legal matter taking place on a reservation?: YES: _____ NO

If this is a custody matter, do you need court ordered mediation?: YES NO

If you are in need of legal information, be sure to go to www.montanalawhelp.org where you can find legal information and forms for legal problems such as divorce, parenting plans, landlord/tenant matters and public benefits. There are also numerous self-help law resources available in MT. See those resources at www.mtlsa.org/legal-information/

You can mail or fax this form to Montana Legal Services Association (MLSA).

Our mailing address is:

Montana Legal Services
Association

616 Helena Ave, Ste 100
Helena, MT 59601

Our fax number is:

406-442-9817

Our email is:

helplineMLSA@mtlsa.org

Our Live HelpLine # is:

1-(800)-666-6899

(Tuesday through

Thursday 9:00AM – 1:00

PM)

For Office Use Only: (Please print legibly)

Received By: _____ Date: _____

Entered By: _____ Date: _____