



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.

Notice: MLSA only accepts requests for help submitted through an official application process: our paper application, online intake form, HelpLine, or a partner referral. Applications submitted through any other method, or completed with the assistance of AI, may be denied.

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

- | | | |
|--|--|--|
| ☐ Custody/Parenting | ☐ Human Trafficking | ☐ Security Deposit |
| ☐ Divorce | ☐ Tax Issues | ☐ Housing Voucher |
| ☐ Order of Protection | ☐ Employment | ☐ Foreclosure |
| ☐ Emancipation | ☐ Money Problems | ☐ Indian/Tribal Law |
| ☐ Minor Guardianship | ☐ Public Benefits | ☐ Wills/Estates |
| ☐ Victim of Crime | ☐ Eviction | ☐ Other _____ |

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?: _____

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 9:00 AM – 1:00 PM)

For Office Use Only: (Please print legibly)

Received By: _____ **Date:** _____

Entered By: _____ **Date:** _____