

vs.	Plaintiff	) Docket Number:
		)
	Defendant	) PACSES Case Number:
		) Other State ID Number:

**APPLICATION FOR ASSIGNMENT OF COUNSEL**

I, \_\_\_\_\_, hereby apply for the assignment of counsel to represent me in the above-captioned Domestic Relations case.

1. My address is: \_\_\_\_\_  
\_\_\_\_\_

2. My telephone number is: \_\_\_\_\_

3. My Social Security Number is: \_\_\_\_\_

4. My date of birth is: \_\_\_\_\_

5. The reason I am seeking counsel is: \_\_\_\_\_

Hearing/Conference Date/Time: \_\_\_\_\_

Other Reason: \_\_\_\_\_  
\_\_\_\_\_

6. I am the parent of the following child(ren) who live(s) with me:

(Give names and ages)

a. \_\_\_\_\_

b. \_\_\_\_\_

c. \_\_\_\_\_

7. I provide support for the following persons who do not live in my home (Give names and ages):

a. \_\_\_\_\_

b. \_\_\_\_\_

c. \_\_\_\_\_

8. The following persons also reside in my home, (Give names and ages) and their incomes are as follows:

a. \_\_\_\_\_

b. \_\_\_\_\_

c. \_\_\_\_\_

9. I do or do not (circle one) provide for my own living expenses. If you do not provide for your own living expenses, explain who provides your support and how much:

\_\_\_\_\_

10. I did or did not (circle one) talk to a private lawyer about my case. If you did, state the lawyer's name and why he/she is not handling your case:

\_\_\_\_\_

\_\_\_\_\_

11. Complete the attached financial statement providing full, accurate information.

I verify that the statements made in this application are true and correct. I understand that false statements herein are made subject to the penalties of 18 Pa. C.S. § 4904, relating to unsworn falsification to authorities.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature