Thank you for contacting the Northwest Colorado Legal Services Project regarding your legal problem.

Enclosed are an application and other forms we need you to complete in order for us to determine if we can help you with your problem. Feel free to include an extra sheet of paper to write down additional information, comments or questions.

Please read the forms carefully, complete them as soon as you can and return them to the address listed above. **PLEASE INCLUDE COPIES** of any court papers, leases, or other papers which are necessary to understand your case.

Remember that you **are responsible for any deadlines** in your case unless and until we find an attorney to represent you.

**IF YOU HAVE AN EMERGENCY SITUATION**, you must provide us with a phone number where we can reach you during the day. This number can be your cell phone, a neighbor’s number, a work number, or a friend’s number. You must be able to get messages quickly at this number. You should also call the toll-free telephone number (listed above) at least once each day to find out if we have a message for you or need to talk to you.

**IF YOU ARE FAXING YOUR APPLICATION TO US**, you must call us after sending your fax to make sure that we received everything that we need.

**IF YOU WANT TO BRING YOUR APPLICATION TO OUR OFFICE**, you must call first to make sure that someone is available to accept your application. Do not put your application under the door or leave it with someone who does not work for our program.

**PLEASE CALL** us two weeks after you return the forms, if you have not heard from us, to make sure that we received them and so that we can discuss the next step. Although we cannot promise that we will be able to find an attorney to take your case, we will do all that we can to help with your legal problem.

Thank you for contacting us about your problem. I hope we’ll be able to help you. Please call us if you have any questions.

Sincerely,

Patricia Craig
Administrator
APPLICATION FOR LEGAL ASSISTANCE FROM COLORADO LEGAL SERVICES

Kemps #: 

Date of Application: __________________

1. Applicant’s Legal Name ____________ ____________ ____________
   First Name                       Middle Name                      Last Name

2. Applicant’s Mailing Address:  
   Safe to contact you here?  ☐ Yes  ☐ No  
   City, State, ZIP              County of Residence

3. Phone (H) (   ) (W) (   ) (Cell/Other (   )  
   Safe to call?  ☐ Yes  ☐ No  
   Safe to call?  ☐ Yes  ☐ No  
   Safe to call?  ☐ Yes  ☐ No

4. Your email address:  
   Safe to email you?  ☐ Yes  ☐ No

5. Last 4 digits ONLY of Social Security Number:  # # # # - # # - # # - #

6. Marital Status  ☐ Single  ☐ Married  ☐ Separated (But Married)  ☐ Divorced  ☐ Widowed

7. Date of Birth ____________ Age _____  8. Sex:  ☐ M  ☐ F  9. Primary Language ____________

10. Race:  ☐ White  ☐ Black  ☐ Hispanic  ☐ Native American  ☐ Asian  ☐ Other  ☐ Undeclared

11. Your Husband or Wife:  
   First Name                      Middle Name                      Last Name                      Date of Birth

12. Are you a Citizen?  ☐ Yes  ☐ No  
   (If “yes”, please sign Declaration in #13, below)
   Are you a permanent resident?  ☐ Yes  ☐ No  
   Other legal status?  ☐ Yes  ☐ No

13. If you are a Citizen, please sign the following declaration:

     I declare that I am a citizen of the United States of America.

     Date: __________________ Signature __________________

14. Do you have a disability?  ☐ None  ☐ Physical  ☐ Mental
   Please describe your disability: __________________

15. Are you a victim of domestic violence? Have you been threatened or hurt by a spouse or partner, or by someone else close to you (family or close friend)?  ☐ Yes  ☐ No

16. Have you or any member of your household served in the military, including the Reserves or National Guard?  ☐ Yes  ☐ No

17. Your Living Arrangements:  ☐ Own  ☐ Rent  ☐ Other __________________

18. No. of Adults in your Home ________  No. of Children in Home ________  Household Total ________

19. Household Monthly Gross Income Before Taxes & Expenses are Deducted

   Your monthly Gross income  Your Spouse’s Gross income  Other Residents’ Gross income
   Employment $ _________  $ _________  $ _________
   Welfare Benefits:  ☐ TANF  ☐ OAP  ☐ AND
   ☐ Soc.Sec.Disab. or ☐ Retirement
   SSI
   ☐ Unemployment; ☐ Worker’s Comp
   Income from ☐ Dividends, ☐ Interest,
   ☐ Other Investments, ☐ Rents,
   ☐ Royalties, ☐ Estates, ☐ Trusts)
   Other:  ☐ Child Support,  ☐ Alimony,  ☐ Pension,
   ☐ Military Allotments, ☐ any support money
   received regularly, ☐ regular insurance or
   annuity payments, ☐ VA Benefits
   TOTAL INCOME $ _________  $ _________  $ _________

For office use: Household income is % of poverty level.

*Please fill out both sides of this form*
APPLICATION FOR LEGAL ASSISTANCE FROM COLORADO LEGAL SERVICES

Applicant's Name: _____________________________

20. Household Assets (Total amounts for applicant, spouse and all other residents)
    Please write the amount in each space or write “none”
    Real Estate equity (not including residence) $ __________ Cash on hand $ __________
    Equity in vehicles not used for transportation __________ Checking Account __________
    Household goods (value in excess of $3000) __________ Savings Account __________
    Wearing apparel (value in excess of $1500) __________ CD's, Money Mkt, etc. __________

☐ For office use: Household assets are listed and are within financial eligibility guidelines.

21. Is your income likely to change significantly in the near future?  ☐ Yes  ☐ No
    (If yes, explain how income is likely to change: ____________________________)

22. If you listed no income above, how are you supporting yourself? ____________________________

23. Please tell us what you pay each month for:
    rent/mortgage: __________ medical care/insurance: __________
    child care: __________ other (what is it?): __________

24. If your mailing address is different from your street address, please tell us your street address:

    Street ____________________________ City, State __________ County __________

25. How did you hear about our program? ____________________________

26. If you own a home, please tell us how much equity you have in your home: $ __________

27. ____________________________
    Person filling out application (if not Applicant)  Phone  Relationship to Client

YOUR LEGAL PROBLEM:

28. Brief Description of Your Legal Problem: ____________________________

29. Name(s) of Adverse/Opposing Party ____________________________

30. Deadlines (Court dates, Answer dates, etc.)? ____________________________

31. What County is your legal problem in? ____________________________

32. Please tell us what you would like to do about your legal problem: ____________________________

Signature ____________________________ Date ____________________________

FOR LEGAL SERVICES USE: Is this client eligible for services?  ☐ yes  ☐ no

*Please fill out both sides of this form*
THIS AGREEMENT is between you and Colorado Legal Services, and Northwest Colorado Legal Services Project (a local office of Colorado Legal Services). You are applying for help with a civil legal problem.

This agreement is for the legal problem that you told us about in your application. If you have another legal problem and want help with it, you must fill out a new application with us.

We help people whose income and assets are within the limits set for our program by federal rules. If your income and assets are within our limits, we are allowed to help you. If your income or assets increase while we are helping you, you must tell us. We may have to stop helping you if your income or assets become too high.

We do not have enough staff lawyers and paralegals, or volunteer lawyers and paralegals, to help everyone who applies. We will look at your case to see if we can give you advice or if we can find a lawyer to represent you.

If we help you, you will not have to pay any fees to us or to a volunteer lawyer or paralegal. But you may have to pay any costs of your case such as court filing fees or other costs. We will check to see if court costs can be waived for you.

Once we have your application, while we are deciding if we can help you, you are responsible for your case, and must take care of any deadlines or notices. You must tell us about any deadlines that you know about in your case.

We can’t make any promises to you about how your case will be handled, or how it will end. You may win or lose, or you may settle with the other side. You have the right to decide if you want to settle your case or not. We have the right to tell you what we can do for you, and we can refuse to do what you want us to do—if we don’t think it’s the best thing for you, or if we don’t think it’s ethical, or if we don’t have any staff or volunteers to help with your case. We can also stop helping you if you don’t cooperate with us or with your volunteer lawyer or paralegal.

YOUR RIGHTS:

1. To receive respect, courtesy and professionalism from us and from anyone who helps you.
2. That we will keep everything about your case confidential (private), although we can talk to volunteer lawyers or paralegals about your case to see if they will help you.
3. That we will handle your case in an ethical manner and not break any rules or laws.
4. That we will answer your questions and concerns as quickly as possible.
5. That we will keep you informed of the status of your case.
6. To make your own decision about how your case is handled, if a lawyer or paralegal is helping you.
7. To be told about what might happen if you lose your case, including if you might owe attorney fees to the other side.
8. To receive help without regard to race, creed, color, religion, gender, sexual orientation, age, national origin or disability.
9. To ask us to explain anything in this form or any other paper we give you.
10. To tell us to stop helping you, if you change your mind or don’t like what we are doing for you. If your case has been filed in court, the judge must allow your staff lawyer or volunteer lawyer to stop helping you.
11. To complain if you don’t like how we handle your case, or how you are treated by us.

YOUR DUTIES:

1. To give us respect and courtesy. This includes both staff and volunteers who work with you.
2. To give us all the information we need to decide if we can help you, and all the information needed to help you if we accept your case.
3. To tell us the truth about your case, without exception.
4. To work with us on your case, and keep in touch. If your address or phone number changes, you must tell us. If you are referred to a volunteer lawyer, you must work with and respect your lawyer just as we ask you to work with and respect our staff. This includes anyone in your volunteer lawyer’s office or anyone you are asked to work with while you are being helped with your case.
5. To read this form, and any other form we ask you to sign, and to ask questions if you don’t understand it.

I HAVE READ AND UNDERSTOOD THE CLIENT RIGHTS AND DUTIES.

Please sign here    Date    We will sign here    Date
Colorado Legal Services
AUTHORIZATION FOR RELEASE OF INFORMATION
Clients Referred to Volunteer Lawyers

Client: ________________________________________________

Case: _______________________________________________

Colorado Legal Services (CLS) often asks volunteer lawyers to help our clients. If we refer your case to a volunteer lawyer, you will still be a client of CLS, and you will also be a client of the volunteer lawyer. This Authorization allows CLS and your volunteer lawyer to talk to each other about your case, and to share information and documents about your case with each other.

This includes:
• Talking about your case (including the facts and legal issues involved);
• Talking about your eligibility for help by CLS and your volunteer lawyer;
• Talking about any difficulties the volunteer lawyer has while working with you;
• Sharing information about the outcome of your case;
• Sharing copies of court papers or other papers such as letters, agreements, or contracts;
• Giving your volunteer lawyer help with your case, which could include providing sample documents or help from another lawyer, whom your volunteer lawyer may need to talk to about your case.

Why do we need to do this?
• The volunteer lawyer is working with you because CLS asked the lawyer to volunteer to help you.
• CLS supports the volunteer lawyers and wants to help them do their best work on cases.
• CLS also needs to know that its rules are being followed, including making sure that you are eligible for help.

Who decides what happens in your case?
• You, the Client, decide what action should be taken in your case (after talking to your volunteer lawyer).
• Your volunteer lawyer decides if the action you choose to take is (1) legal and ethical; and (2) helpful to you; and (3) related to the case that CLS referred to your volunteer lawyer. (Volunteer lawyers should not help you with legal matters that are not part of the case that CLS asked them to help you with.)
• CLS decides which cases to refer to volunteer lawyers. CLS may also decide to pay a small fee to the volunteer lawyer (at a greatly reduced rate) for the help the volunteer lawyer gives to you. If CLS pays the volunteer lawyer, CLS and the volunteer lawyer will have an agreement about the legal work CLS will pay for, but CLS will not decide what action to take – you, the Client, will decide that.

Who pays?
• You, the Client, will be expected to pay for the costs of the case, including court filing fees, serving papers on the other side of the case, office costs like copies and postage, etc.
• Volunteer lawyers do not pay any costs. They are giving their time and skills to help you.
• You, the Client, do not pay the fees to the volunteer lawyer; you only pay the costs. CLS pays the volunteer lawyer, if your case is sent to a volunteer lawyer on a reduced-fee basis.

Your right to complain
• You have the right to complain if you don’t like the way your case is handled, by CLS or by your volunteer lawyer.
• You can also decide at any time that you want to stop getting help from CLS or your volunteer lawyer, but you must let CLS and the volunteer lawyer know that you want him/her to stop helping you.
• You can cancel this Authorization at any time. (But CLS and your volunteer lawyer may have to stop helping you if you do that.)
• This Authorization ends when your case is over and is closed.

I authorize CLS and my volunteer lawyer to share information, and I understand and agree to these terms.

_________________________________  ______________________________________
Signature of Client                            Date
Information About You
Your Name: ___________________________ Date of Birth: ________________
Street Address: _____________________ City: ___________________ County: __________
Mailing Address: _____________________ City: ___________________ State: ______ Zip: ______
Phone: (home) ________________________ (work) ____________________ (other) __________
Are you a U.S. Citizen? yes no
If no, please tell us your legal status: ________________________________
and country of origin: ____________________________. Is your spouse your sponsor? yes no
Will you need an interpreter? yes no What language? ____________________________
When (date) did you become a resident of Colorado? ________________ Do you intend to stay? yes no
Are you now in the military service? yes no What branch? ____________________________

Information About Your Spouse
Spouse’s Name: ___________________________ Spouse’s Date of Birth: ________________
Street Address: _____________________ City: ___________________ County: __________
Mailing Address: _____________________ City: ___________________ State: ______ Zip: ______
Phone: (home) ________________________ (work) ____________________ (other) __________
Is your spouse a U.S. Citizen? yes no
If no, what is his/her legal status? ________________________________
and his/her country of origin: ____________________________.
Are you the sponsor for your spouse? yes no
When (date) did he/she become a resident of Colorado? ________________ Does he/she intend to stay? yes no
Spouse’s employer – name: _______________ address: ____________________________
Spouse’s gross monthly income: $ ______. How long has spouse worked for current employer? ______
Where can spouse be served with divorce papers? home work other: ____________________________
Is your spouse now in the military service? yes no What branch? ____________________________

Information About Your Marriage
Date of Marriage: ___________________________ Place of Marriage: ________________ (city, state)
If you were married by common law, please tell us:
When did your marriage begin? ____________________________
In what state were you living when your marriage began? ____________________________
How long have you lived in Colorado since your marriage began? ____________________________
We consider ourselves husband and wife. We have lived together. We sign documents such as leases and loan papers as husband and wife. We file tax returns as a married couple. Wife and Husband use the same last name. We introduce each other as husband and wife. We were both of legal age when we married each other. Neither of us was married to anyone else when we married each other.

Are you separated from your spouse? yes no Date of Separation: ____________________________
If you are not separated, what are your plans or wishes? ____________________________

Please fill out all three pages of this information sheet!
Information About Your Court Case

Have you filed for divorce? yes no
Has your spouse been served? yes no When? Where?

Has your spouse filed for divorce? yes no

Do you have an attorney? yes no Name of attorney:
Does your spouse have an attorney? yes no Name of attorney:

Have any court hearings been held? yes no
If yes, what hearing? when?
Are any court hearings scheduled? yes no
If yes, what hearing? when?

ATTACH COPIES OF ANY COURT PAPERS WHICH YOU HAVE FILED, OR WHICH YOU HAVE RECEIVED FROM YOUR SPOUSE.

Information About Domestic Violence

Have you been threatened or injured by your spouse? yes no
Describe the threats: When:
Describe the injuries: When:

Have the police been called? yes no
Was your spouse arrested? yes no
When: Charges:
Were you arrested? yes no
When: Charges:

Have you ever gotten a protection (restraining) order against your spouse? yes no
Has your spouse ever gotten a protection (restraining) order against you? yes no
Please provide dates of any hearings to be held about a restraining order:
and tell us in what county the hearing will be held: case no.: ATTACH COPIES OF ANY PROTECTION (RESTRAINING) MOTIONS & ORDERS AND POLICE REPORTS.

Have you ever contacted a domestic violence program or shelter? yes no

Do the children witness abuse? yes no
Have the children been abused? yes no

Have you given us a safe way to contact you? yes no
Safe address where we can write to you:
Safe phone number at which we can call you:

Information About Your Children

Please fill out the separate form called “Parental Responsibilities (Custody) Information Sheet”, for your children who are younger than 19 years of age and who were born during your marriage or adopted by you and/or your spouse during your marriage.

Is the wife pregnant? yes no If yes, what is the due date?
Is the husband the father of the unborn child? yes no If not, who is the father?

There are no children who were born or adopted during this marriage.
All children born or adopted during this marriage are now 19 years of age or older.
**Information About the Assets of the Marriage**

In Colorado, anything bought or given to you or your spouse during your marriage, unless it was an inheritance or gift to one of you, will be considered marital property by the court. Please list all property bought or given to your or your spouse during your marriage. Use extra paper if you need it.

<table>
<thead>
<tr>
<th>Address or description</th>
<th>Address or description</th>
<th>Date of purchase</th>
<th>Date of purchase</th>
<th>What is it worth?</th>
<th>What is it worth?</th>
<th>Who’s listed as owner?</th>
<th>Who’s listed as owner?</th>
<th>Who’s listed on the loan?</th>
<th>Who’s listed on the loan?</th>
<th>Do you want it?</th>
<th>Does your spouse want it?</th>
</tr>
</thead>
</table>

**Information About the Debts of the Marriage**

Debts of the marriage *may* include all debts taken out by you or your spouse since the date of your marriage. List all debts below. Use extra paper if you need it.

|------------------|------------------|----------------------|----------------------|---------------------|---------------------|------------------------|------------------------|----------------|----------------|----------------|----------------|

**Information About Temporary Orders You May Need**

Do you believe you will need temporary orders for:
- Custody? Explain:
- Child Support? Explain:
- Use of the family home? Explain:
- Maintenance (alimony)? Explain:
- Debt payments? Explain:

**Information About Maintenance (Alimony)**

Maintenance can be ordered on a temporary basis while your case is waiting for final orders. However, courts generally order maintenance on a permanent basis ONLY if the spouses were married a long time (especially if one spouse didn’t work outside the home), or if one spouse is disabled or is taking care of a disabled child. It is up to the judge to decide if either party gets maintenance.

Do you want permanent maintenance (alimony)? yes no
Please explain why you feel you will qualify for permanent maintenance:

**Legal Separation**

If you would like to obtain a decree of legal separation, instead of dissolution of marriage, please explain:

**Declaration of Invalidity (Annulment)**

If you feel that your marriage should be annulled, please explain:

Please fill out all three pages of this information sheet!