

LAWYER'S NOTES *(office use only)*

Checklist:

- Names:** Full names of Rōia and Kaiāwhina provided below.
- Copies & Referrals:** have attached copies of relevant docs that the client brings in, and of the lawyer referral form
- Attachments:** have attach all notes taken in the interview (by the lawyer and kaiāwhina)
- Facts and Advice:** Summary of notes detailed below.

Rōia / Lawyer		Kaiāwhina	
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FACTS: _____

ADVICE: _____

Did the client mention being affected by (✓) – *if you tick any category please alert the kaiwhakamanawa / staff member					
Domestic violence	<input type="checkbox"/>	Sexual violence	<input type="checkbox"/>	Mental Health / Depression	<input type="checkbox"/>
Addiction	<input type="checkbox"/>	Homelessness	<input type="checkbox"/>	Other? <i>(please state)</i>	<input type="checkbox"/>
Does the client have support in place? <i>(If yes, please state)</i>					
If no, would the client like help to access support? <i>(If yes staff will arrange, or you can, if comfortable to do so)</i>					
Please list org's / agencies you referred the client to <i>(*For lawyer referrals use the lawyer referral form)</i>					

LEGAL CATEGORY

- | | | | |
|---|---|---|---|
| 1. ADMINISTRATIVE
a) ACC <input type="checkbox"/>
b) Births, Deaths & Marriages <input type="checkbox"/>
i) Wills/estates/3PR <input type="checkbox"/>
c) Education <input type="checkbox"/>
d) Immigration/Citizenship <input type="checkbox"/>
e) Legal Aid <input type="checkbox"/>
f) Local Government <input type="checkbox"/>
g) LTSA <input type="checkbox"/>
h) Mental Health <input type="checkbox"/>
i) Ombudsman <input type="checkbox"/>
j) Tax <input type="checkbox"/>
k) Welfare <input type="checkbox"/> | 2. CIVIL
a) Consumer <input type="checkbox"/>
b) Employment <input type="checkbox"/>
c) Financial <input type="checkbox"/>
i) Bankruptcy <input type="checkbox"/>
d) Legal Entities <input type="checkbox"/>
e) Legal Systems <input type="checkbox"/>
f) Media <input type="checkbox"/>
g) Medico Legal <input type="checkbox"/>
h) Neighbours <input type="checkbox"/>
i) Human Rights <input type="checkbox"/>
i) Privacy <input type="checkbox"/>
j) Property <input type="checkbox"/>
i) Insurance <input type="checkbox"/>
k) Tenancy <input type="checkbox"/>
l) Trusts <input type="checkbox"/> | 3. CRIMINAL
a) Crown Prosecution <input type="checkbox"/>
b) Local Government <input type="checkbox"/>
c) Police Prosecution <input type="checkbox"/>
i) Traffic <input type="checkbox"/>
4. FAMILY
a) Adult Relationships <input type="checkbox"/>
i) Family Property <input type="checkbox"/>
b) Care of Children <input type="checkbox"/>
i) Child Support <input type="checkbox"/>
c) Domestic Violence <input type="checkbox"/>
d) PPPR/Disability <input type="checkbox"/> | 5. MĀORI LAW <input type="checkbox"/>
6. RILAS
a) Temporary Visa <input type="checkbox"/>
b) Residence Visa <input type="checkbox"/>
c) RFSC <input type="checkbox"/>
d) Refugee Quota <input type="checkbox"/>
e) Other <input type="checkbox"/> |
|---|---|---|---|

Statutory Declaration Witnessing and Affidavit Certifying Copies of Documents *(Indicate legal category above)*

No QA required **OR** QA done by:

Close **OR** Leave open + assign to staff: _____
OR Ongoing -add to ACTIONSTEP NO: _____