



Acknowledgement of Duty Counsel Services

I acknowledge that the duty counsel (“the lawyer”) has told me that he or she cannot provide me with the same help I could get from a lawyer I hired privately to represent me, and that it is strongly recommended that I hire a lawyer to represent me in this matter.

I acknowledge that the lawyer can only assist me by:

- giving me verbal advice only about my legal rights, obligations, and court procedures with no written follow-up;
- reviewing and helping me prepare court documents;
- helping me negotiate and settle issues on a temporary or final basis;
- helping me prepare or review consent orders or family agreements that can be filed in court;
- attending court with me to ask for an adjournment, an unopposed or consent order, or an emergency restraining order, if necessary;
- informing me on how to make a court appearance; and
- referring me to other resources.

I am aware that the lawyer cannot:

- go to court on any contested trial or any hearing where the issues are not simple, as determined by the lawyer;
- help me with complex property disputes, or tax advice.
- help me if I already have a lawyer acting for me;
- prepare my court documents;
- help me with any legal problems that are not related to family law;
- serve or accept service of any court documents; or
- become my lawyer while acting as duty counsel.

I am aware that the lawyer is not responsible if the advice given is inadequate or inappropriate because I failed to disclose relevant information about my case or prepared inadequate affidavit or other material.

I am aware that the Family Duty Counsel Program can only provide me with a maximum of three hours of legal advice (or forty-five minutes of legal advice, if I am not financially eligible).

I am aware that I may be contacted by a Legal Services Society (LSS) representative to answer questions about the value of this service. If contacted, I may refuse to participate. **I consent** to my file and/or client information being released to an employee or designate of LSS for evaluation.

Date (dd/mm/yyyy): _____

Name of client: _____

Name of opposing party: _____

Client home address: _____ Client phone number _____

Occupation of client: _____ Net monthly income of client: _____

Signature of client: _____

Name of duty counsel: _____

Court file number: _____ SC/PC Registry: _____