

Indiana Legal Services, Incwww.indianalegalservices.org

Johnson County Legal Aid

Various locations - see notes

Sponsoring Org: Johnson County Bar Association

Services: No custody, probate, small claims, benefit appeals or criminal issues.

Eligibility: Johnson County

Counties Served: Johnson

Notes: Intake 2nd and 4th Tuesdays, 10:00 a.m. at Greenwood Public Library 310 S. Meridian Street, Greenwood Intake 3rd Tuesday, 12:00 p.m. at Law Library, Johnson County Courthouse Franklin, IN

Printed: December 14, 2021

<http://www.indianalegalservices.org/node/610/johnson-county-legal-aid>

© 2021 Indiana Legal Services, Inc

Icons by [Icons8](https://icons8.com/) (<https://icons8.com/>)



Application - Johnson County Legal Aid Intake Project

Name: _____ Date: _____

Address _____ City _____ Zip _____

Telephone for message contact & messages _____ (leave number it is safe to contact)

Male _____ Female _____ Marital Status: Married Single Divorced Widow/Widower

DOB: _____ Date of Marriage: _____ Date of Separation: _____ Pregnant: Yes No

Resident of Indiana for past 6 months and Johnson County for past 3 months? Yes No

Nearest relative: _____ Relationship: _____ Telephone: _____

Relative address: _____ City: _____ State: _____ Zip: _____

Number of people in household including family, room mates, children, anyone living there: _____

| Names of people in household | Age | Relationship | Dependant for support? |
|------------------------------|-------|--------------|------------------------|
| _____ | _____ | _____ | Yes No |
| _____ | _____ | _____ | Yes No |
| _____ | _____ | _____ | Yes No |

Your Employer: _____ Hours per Week: _____

Address: _____ Hourly Wage: _____

Length of Time of Employment: _____ Previous Employer: _____

If you are unemployed, explain why _____

Receive SSDI or SSI: Yes No Amount per month: _____ Date began: _____

Receive pension or annuity payment? Yes No Amount per month: _____

Receive child support? Yes No Amount per month: _____

Receive public welfare, food stamps, assistance? Yes No Amount per month: _____

Receive interest, dividends or regular gifts? Yes No Amount per month: _____

Any other source of income? Yes No Amount per month: _____

Do you own a home? Yes No Fair Market Value: _____

Amount of Mortgage Due on Home _____ Mortgage Payment per Month: _____

Do you own a mobile home? Yes No Value: _____ Owe: _____

Do you own a boat or motorcycle? Yes No Value: _____

Do you own stocks, bonds, annuity? Yes No Value: _____

Do you own an automobile? Yes No Value: ___ Owe: ___ Year: ___ Make: ___

Other Automobile? Yes No Value: _____ Owe: _____ Year: _____ Make: _____

If no Automobile what transportation do you use? _____

Do you have a checking account? Yes No Bank: _____ Balance: _____

Do you have a savings account? Yes No Bank: _____ Balance: _____

List of debts/debtors For: Amount:

Full Name of Opposing Party: _____

Relationship of Opposing Party: Spouse Ex-spouse Partner Ex-Partner Family Other

Opposing Party Address: _____

City: _____ State: _____ Zip: _____ Telephone number: _____

City: _____ State: _____ Zip: _____ Telephone number: _____

Employment: _____ Hourly/Weekly Wage: _____

What legal problem do you have:

Digitized by srujanika@gmail.com

Court: Cause Number:

Pending Court Date:

Verification

I hereby affirm that I have read the above application and completed it fully and truthfully. I further agree to keep Johnson County Legal Aid and my assigned attorney advised in any changes in my employment, case, address, telephone number or other information.

| | |
|------|-----------|
| Date | Applicant |
|------|-----------|

Applicant

Johnson County Legal Aid: _____ Approved _____ Declined _____