

**MODEST MEANS PROGRAM
OF THE SCHENECTADY COUNTY BAR ASSOCIATION**

CLIENT APPLICATION FORM

TO SEE IF YOU QUALIFY PLEASE COMPLETE FORM AND
MAIL WITH SUPPORTING DOCUMENTS TO:

SCHENECTADY COUNTY BAR ASSOCIATION
PO Box 1728
SCHENECTADY, NEW YORK 12301-1728

info@schenectadycountybar.org

****Please use the back of page for any answer for which there isn't enough space****

CONTACT INFORMATION

Name: _____ Date: _____

Address: _____

Phone Numbers: Home _____ Work _____ Cell _____

Date of Birth: _____

HOUSEHOLD INFORMATION

Marital Status: Single Married Separated Divorced Widowed

Total Number of People in the Household (include yourself): _____

Do you support anyone who does not live with you? Yes No

If Yes, whom? _____

EMPLOYMENT INFORMATION

What is your Occupation: _____

Are you presently employed? Yes No If yes, where? _____

If no, when and where were you last employed, and what was your monthly income from that employment? _____

LEGAL MATTER INFORMATION

Have you been served with any legal papers?

If Yes:

When? _____ What? _____

Do you have an upcoming court date in **Family** or **Supreme Court**? (Please Circle One)

If Yes:

What is the date? _____ Who is the Judge assigned? _____

What is the name of the other person involved with the legal matter?

Name: _____ Maiden name (if any): _____

Please provide a brief description of your current legal matter or the legal matter you wish to initiate:

CURRENT MONTHLY INCOME FOR ALL HOUSEHOLD MEMBERS

(Include paycheck stubs covering the most recent six-week period for each employed member of the household (copies only), and the most recently filed Federal income tax return showing income from employment for each household member)¹

Your Gross Monthly Income (before taxes)	\$ _____
Current Spouse Gross Monthly Income (before taxes).....	\$ _____
Other Household Members Gross Monthly Income (before taxes).....	\$ _____
Pensions and Retirement.....	\$ _____
Social Security	\$ _____
Disability and Unemployment	\$ _____
Public Assistance (AFDC, Welfare, etc.)	\$ _____
Child Support	\$ _____
Alimony	\$ _____
Dividends and Interest	\$ _____
Rental Income	\$ _____
All Other Sources (Specify).....	\$ _____
Total Monthly Income	\$ _____

¹ Program staff may request additional documentation relative to either income or asset items.

ASSETS¹

Do you: rent or own your home?

What is your monthly rent/mortgage? _____

Do you own other real property? Yes No

If yes, please explain what it is, where it is located:

What is the total value of all real estate you own, *other than* your home? _____

Vehicle(s) you own:²

Make: _____ Year: _____ Model _____

Make: _____ Year: _____ Model _____

How much money is in your checking account? _____

How much money is in all savings accounts you have? _____

How much cash value do you have in your home? _____

What is the total value of all stock, bonds, Certificates of Deposit and Money market accounts you own? _____

What is the cash value of any life insurance policies? _____

What is the value of all luxury items you own (jewelry, artwork, heirlooms, etc.)? _____

I hereby affirm that the foregoing statements are true, under the penalty of perjury:

BEFORE SIGNING ENSURE THAT ALL REQUIRED DOCUMENTATION IS PROVIDED TO AVOID DELAYS IN PROCESSING YOUR APPLICATION:

- Copies of Paycheck stubs covering most recent 6 week period
- A check or money order to the Schenectady County Bar Association for \$15.00
- Copy of your most recently filed Federal income tax return and W2
- the application form completed and signed

(Signature)

Date Signed: _____

For Modest Means Staff Only:

Case Number: _____

Attorney Assigned: _____

² One car you own will not be considered an available asset in determining your eligibility.

**MODEST MEANS PROGRAM
OF THE SCHENECTADY COUNTY BAR ASSOCIATION
CLIENT PARTICIPATION AGREEMENT**

The Modest Means Program (MMP) is designed to make legal services available to lower income individuals who are ineligible for legal aid, but unable to afford regular attorney fees. Clients for the MMP qualify at 200% of the federal poverty guidelines. The guidelines may be adjusted whenever there are changes in the federal poverty guidelines. MMP is not a legal aid program. The client must have sufficient resources to pay for any services they receive.

Lawyers who accept MMP referrals agree to charge no more than \$50 for the initial, one-hour, office consultation and no more than \$100 per hour for services beyond the initial office consultation. They further agree that the amount of the retainer fee, if any, will be no more than \$1,000. While there are no further restrictions on fees, flexible payment schedules are expected

Potential clients are screened initially over the phone. At this time the potential client will be mailed an Application. It will be up to the client to return the completed form **and pay an administrative fee of \$15 to the Schenectady County Bar Association to demonstrate financial eligibility and willingness to follow through after referral.** Once **the fee and completed Application are returned**, the client is contacted and given a referral to an attorney who has agreed to accept his or her case. At this time, neither client nor attorney is obligated to continue an attorney/client relationship beyond the first office visit.

The Schenectady County Bar Modest Means Program has a limited number of attorneys available. The Program further reserves the right to refuse to make a referral to an attorney even if the potential client is financially eligible for the Program. If no attorney referral is made for you through the Modest Means Program, your administrative fee will be returned.

Name: _____ Date: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Telephone Number: _____

I, _____ (client), have requested that I be assigned an attorney by the Modest Means Program. I have read the above description of the Modest Means Program and understand that this program is intended to assist persons who meet certain financial guidelines. My participation is voluntary. By requesting referral to an attorney, I agree