

Criminal case **assignment list preference**

LEGAL AID PROVIDER APPROVAL LEVEL 1-4

Step 1 **Give us your details**

Title Mr Mrs Ms Miss Dr Other _____

Surname _____

First name/s _____

Preferred first name _____

Contact details

Direct dial number _____

Mobile number _____

Fax number _____

Email _____

Street address _____

Postal address _____

Approval as a listed provider

Are you currently an approved legal aid provider?

No

Yes. Provider number: _____

Step 2 **Tell us your preferences for assignment lists**

Provider Approval Level (PAL)

I wish to receive rotational assignments for the following provider approval level cases:

PAL 1 PAL 2 PAL 3 PAL 4

Assignment list preference

I wish to be on the following cluster and assignment lists (*choose from selection below*):

Preferred cluster* _____

**Under the current assignment policy, providers may only be on one cluster at a given time.*

Preferred assignment lists within the cluster:

Cluster (assignment lists within each cluster)

- Whangarei (Whangarei, Kaitaia, Kaikohe, Dargaville)
- Auckland (North Shore, Auckland, Waitakere, Manukau, Papakura, Pukekohe)
- Hamilton (Hamilton, Te Awamutu, Huntly, Te Kuiti, Morrinsville, Thames, Taumaranui)
- Rotorua (Rotorua, Taupo, Tokoroa)
- Gisborne (Gisborne, Wairoa, Ruatoria)
- Tauranga (Tauranga, Whakatane, Opotiki, Waihi)
- Napier/Hastings (Napier, Hastings, Waipukurau, Dannevirke)
- New Plymouth (New Plymouth, Hawera)
- Whanganui (Whanganui, Marton, Taihape)
- Palmerston North (Palmerston North, Levin)
- Wellington (Wellington, Porirua, Hutt Valley, Masterton)
- Nelson/Blenheim (Nelson, Blenheim, Kaikoura)
- Christchurch (Christchurch, Timaru, Ashburton, Greymouth, Westport)
- Dunedin (Dunedin, Alexandra, Oamaru)
- Invercargill (Invercargill, Gore, Queenstown)

If you are changing clusters, please tell us the date you wish to change:

D	D	/	M	M	/	Y	Y
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Limit number of assignments

I want to limit the number of assignments I receive:

- No
- Yes. Percentage (eg 50% would be half of what you would be entitled to receive)

Step 3 Sign and date the form

Your signature

Date

D	D	/	M	M	/	Y	Y	Y	Y
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Step 4 Send in your application

You can complete this form online or print and complete.

- If you complete the form online, please email to legallaidprovider@justice.govt.nz
- If you print and complete the form, please send to
Provider Services
Legal Aid Services
Ministry of Justice
Level 6, Justice Centre, 19 Aitken Street, Wellington 6011
(or SX10125, Wellington)