

Making a **complaint about a legal aid provider**

Please use this form if you want to make a complaint about a legal aid provider who is/has provided legal services to you or someone you know. You don't have to use this form. You can send us a complaint by post or email.

Before making a complaint, we encourage you to try to resolve any issues by talking to the legal aid provider directly, unless it is inappropriate to do this.

You may complete this form online or print and complete. If there is not enough room on this form, please attach pages.

1. If you complete the form online, please email to

legalaidcomplaints@justice.govt.nz

2. If you print and complete the form, please send to

Legal Aid Providers National Service Delivery Ministry of Justice Level 3, Justice Centre 19 Aitken Street Wellington 6011 (or SX10088, Wellington)

PART 1

Your details

| Title | Mr Mrs Ms Miss Dr Other |
|-------------------------|---|
| Given name | |
| Family name | |
| Your role as complaina | nt egal aid client friend or relative (of legal aid client) |
| | court staff lawyer judge |
| | other |
| Your contact details | |
| Phone number | |
| Email | |
| Postal address | |
| | |
| | |
| What is the best way to | contact you?phoneemailpost |

PART 2

Your complaint

Who is the legal aid provider you are complaining about?

| Ν | а | m | h | e |
|---|---|---|---|---|
| | | | | |

Firm (if applicable)

Please give us details of the complaint

Examples of complaints:

- involving you in unreasonable delays
- not keeping you informed about the work they are doing for you
- asking you for fees when you have a legal aid grant.

Please provide detailed information including:

- the events that have led to your complaint
- what the legal aid provider did or did not do
- the date(s) of the conduct you are complaining about.

Please attach copies of any supporting documents.

Tell us what resolution would you like

Examples of preferred outcomes:

- a different legal aid provider
- reconsideration of your grant of legal aid
- admission of fault or an apology from the provider
- improved communication from the provider.

PART 3 Confirmation

Agreement statement

I agree that the information I have provided with this complaint is true and correct to the best of my knowledge.

I would like the Ministry to look into my complaint and, if appropriate, refer conduct issues to the New Zealand Law Society.

Disclosure statement

If you do not agree to the Ministry or legal aid provider disclosing information about the complaint, we may not be able to investigate your complaint.

I understand that you will send a copy of my complaint to the legal aid provider for their comments.

I have waived lawyer-client privilege so the Ministry can investigate my complaint.

If you are making this complaint on behalf of a legal aid client.

I understand that by signing this form I consent to the Ministry disclosing the complaint to the legal aid provider who is the subject of this complaint.

Signature

Date

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PART 4

Sending in your complaint

Before sending in this form check

Filled in parts 1-3

Attached any extra pages used when there wasn't enough room on this form

Attached any documents that support the complaint

When you have completed this form please send to:

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or legalaidcomplaints@justice.govt.nz