

Form 19¹
Rule 40(1)
Guideline #19

File No. _____

IN THE COURT OF APPEAL OF NEWFOUNDLAND AND LABRADOR

Insert notice that the appeal involves a child if applicable.

BETWEEN:

APPELLANT²

AND:

RESPONDENT³

APPLICATION FOR APPOINTMENT OF COUNSEL

The _____ (party)⁴ applies for the appointment of counsel.

The basis for this application is:

State the legal rule or principle which supports the application, for example,
the *Canadian Charter of Rights and Freedoms*.

The reasons for the application are set out in the attached affidavit.

Dated at _____, _____, this ____ day of _____, 20____.
City or Town Province month year

signature

name of party⁵ or lawyer and firm name

The address for service is:

Street address

City or Town, Province

Postal Code

Telephone

Email

Name of lawyer handling the file
Counsel for _____

To:

name of opposing party⁶ or lawyer and firm name

The address for service is:

Street address

City or Town, Province

Postal Code

Telephone

Email

Name of lawyer handling the file

Counsel for _____

This application is set to be heard on the ____ day of _____, 20____,
month year

at 10:00 am.

Court Officer

APPOINTMENT OF COUNSEL – AFFIDAVIT

I, _____ (name), _____ (occupation (optional)) Of

_____ (City or town), _____ (Province),

swear/affirm⁷ that the following facts are true:

At the appeal I will be arguing the following points:

Give a brief overview of what your appeal is about.

Tick the box for each statement that applies and fill in the blanks:

I need a lawyer to argue my case because I do not have the necessary skills to organize the facts, research the law, and present the case myself:

- I applied for legal aid and was refused. I appealed the initial refusal for legal aid to the legal aid commission and was refused:⁸

- I have taken the following steps in an attempt to arrange my finances so that I could pay a lawyer for all or part of my appeal:

Describe the steps you have taken.

- Other relevant facts are:

List any other facts you want the Court to consider.

I make this affidavit in support of my application for the appointment of counsel for my appeal.

Sworn/affirmed⁹ before me at

_____ (City or Town) in the

province of _____

signature of deponent

this ____ day of _____, 20____
month year

signature of Commissioner

¹ If you need extra space to answer any questions, attach an extra page and write “see extra page” beside the answer that needs it

² Write name of each Appellant

³ Write name of each Respondent. Unless you are jointly appealing with another person, every other party is a Respondent.

⁴ Choose either “Appellant” or “Respondent” or write the name of the person who is making the application

⁵ Choose either “Appellant” or “Respondent” or write the name and address of the person who is making the application

⁶ Choose either “Appellant” or “Respondent” or write the name and address of the party or parties not making the application or their lawyer. If there is more than one, fill out the name and address of each, separately.

⁷ Choose “swear” or “affirm” according to your preference and strike out or delete the other word

⁸ You may provide any clarification in the space provided, but this is optional

⁹ Choose “swear” or “affirm” according to your preference and strike out or delete the other word