

Dokiman sa a PA yon dokiman Legal se pou tradiksyon sèlman.

This is NOT a legal document and is for translation purposes only.

Notice: This is not a public document. The information entered on this form will be kept confidential. You therefore must enter all requested information, including any requested personal identifiers, which are your Social Security number, driver's license number, vehicle plate number, insurance policy number, active financial account number, active credit card number, or military status.

Aviso: Este no es un documento público. La información ingresada en este formulario se mantendrá confidencial. Por lo tanto, debe ingresar toda la información solicitada, incluyendo los identificadores personales requeridos, tales como su número de Seguro Social, número de licencia de conducir, número de placa del vehículo, número de póliza de seguro, número de cuenta financiera activa, número de tarjeta de crédito activa, o estado militar.

		New Jersey Judiciary Jidisyè Nyoudjèze		☐ Approved Apwouve	
Application for Assignment of Counsel					
Aplikasyon pou Deziyasyon Avoka (Haitian Creole)					
☐ Abuse/Neglect (FN) Abi/Maltretans		☐ Guardianship (FG) Gadyen Legal			
The Judiciary will provide reasonable accommodations to enable individuals with disabilities to access and participate in court events. Please contact the local Title II ADA coordinator to request an accommodation. Contact information is available at njcourts.gov. Sistèm jidisyè a ap fè aranjman rezonab pou pèmèt tout endividi enfim you jwenn aksè ak patisipe nan tout seyans tribinal yo. Tan pri kontakte Kowòdinatè Lokal Tit II ADA pou mande aranjman espesyal. Enfòmasyon sou Kontak la disponib nan njcourts.gov. Complaints, motions and other papers submitted to the court should be in English. Tout plent, petisyon ak lòt papye ki soumèt ba tribinal la fèt pou an angle.					
In the matter of Nan dosye de		Docket Number Nimewo rejis		Return Court Date Dat pou tounnen nan tribinal	
Applicant Name Non aplikan a		Applicant Birth Date Dat Nesans Aplikan a		Relationship to Child Relasyon ak Timoun la	
Street Address Adrès kay w - Ri					
City Vil				State Leta	Zip Kòd Postal
Social Security Number Nimewo Sekirite Sosyal Akize a		Home Phone Number Nimewo Telefòn kay la		Cell Phone Number Nimewo Selilè	
Email Address Adrès Imèl					
Spoken language interpreter needed? W bezwen Entèprèt ki pale Lang ou? Language: _____ Lang: _____					

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Applicant's Employer Anplwayè Aplikan a		
Street Address Nimewo/Non Ri Adrès kay		
City Vil	State Leta	Zip Kòd Postal
Supervisor Name Non Sipèvizè a	Work Phone Number Nimewo Telefòn Travay ext.	Length of Employment Tan nan Travay

Step 1: If "Yes" to *either* A or B, go to **Step 2**. (sign page 1 and **STOP**)
 If "No" to *both* A and B, go to **Step 3** (complete page 2 and sign)
Pa No. 1: Si repons ou se "Wi" pou swa A oubyen B ale nan **Pa No. 2** (siyen paj 1 epi **KANPE**)
 Si repons ou se "Non" pou ni A ak B, ale nan **Pa No. 3** (ranpli paj 2 a epi siyen)

A. Do you receive public assistance (e.g., TANF, SNAP, food stamps)? ☐ Yes/Wi ☐ No/Non
 Èske w resevwa asistans piblik (egzanp., TANF, SNAP, manje

B. Are you currently represented by Office of the Public Defender and ☐ Yes/Wi ☐ No/Non
 have no change in your financial circumstances?
 Èske Biwo Avoka La Defans Piblik ap reprezante w aktyèlman
 epi sitiyasyon finans ou pa chanje?

Step 2: I certify that the foregoing statements made by me are true. I am aware if any of the foregoing statements made by me are willfully false; I am subject to punishment.
 (Certification *Rule* 1:4-4(b))
 Mwen sètifye ke deklarasyon sila yo se la verite. Mwen konnen ke si nenpòt nan deklarasyon sa yo ta fo ak tout konesans de kòz mwen ta kab sibi sanksyon. (Sètifikasyon Règ 1:4-4(b))

s/
Date Signature of Applicant
Dat Siyati aplikan an

s/
Date Signature of Witness (Court Designee)
Dat Siyati Temwen (deziye pa Tribinal la)

Step 3: Additional Information - Only complete if "No" to both A and B in Step 1.
Enfòmasyon Adisyonèl - Ranpli li Sèlman si se "Non" pou ni A ak B nan Pa No. 1 a.

Living Arrangement (check one)/Kondisyon lòjman (make yon sèl nan kare yo)

☐ Married/ Civil Union/Domestic Partnership
 Marye/Mariyaj Sivil/Patnè Plasaj

☐ Married, Separated ☐ Divorced
 Marye, Separe Divòse

☐ Living Together ☐ Other (Specify) _____
 Inyon Lib Lòt (espesifye)

Number of people in your household _____
 Nonm de moun ki abite nan kay la

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Income - Gross monthly (before deducting taxes) Revni - Brit masyèl (anvan yo pran taks)	Total (\$) Total	Expenses/Debt (monthly) Depans/Dèt (masyèl)	Total (\$) Total
Welfare Byenèt/alokasyon gouvènman	\$ _____	Mortgage Ipotèk	\$ _____
Salary/wages Salè/Revni	\$ _____	Rent Lwaye	\$ _____
Unemployment Chomaj	\$ _____	Utilities Depans itilite	\$ _____
Disability Andikap	\$ _____	Insurance Asirans	\$ _____
Social Security Sekirite Sosyal	\$ _____	Medical Dèt Medikal	\$ _____
Pension Pansyon	\$ _____	Loans Prè labank	
Support/Alimony Sipò/Pansyon Alimantè	\$ _____	Car Machinn	\$ _____
Other Income & Source Lòt Revni ak Sous	\$ _____	Home Equity Valè akimile sou lòjman a	\$ _____
Total Income (gross monthly) Total Revni (Montan brit masyèl)	\$ _____	Credit Card Debt Dèt Kat Kredi	\$ _____
Other Assets Lòt Byen	Value Valè	Tuition Ekolaj	\$ _____
Own Home ☐ Yes/ Wi ☐ No/ Non Pwopriyetè Kay (make yon sèl nan kare yo)		Other Loans Lòt Prè	\$ _____
Real Estate (specify) Byen imobilye (espesifye)	\$ _____	Court Obligations Frè Tribinal	
		Fines, Fees, Costs Amann, Frè, Depans	\$ _____
		Support/Alimony Sipò/Pansyon Alimantè	\$ _____
Other Personal Property (specify) Lòt Pwopriyete Pèsonèl (espesifye)	\$ _____	Child Support Pansyon Alimantè Timoun	\$ _____
		Other debt (specify) Lòt Dèt	\$ _____
			\$ _____
		Open Judgments (Amt) Jijman an Sispan (Montan) (specify) (espesifye)	\$ _____
Total Value of Assets ValèTotal tout byen	\$ _____	Total Expenses/Debt Total Depans/Dèt	\$ _____

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I certify that the foregoing statements made by me are true. I am aware if any of the foregoing statements made by me are willfully false; I am subject to punishment.

(Certification *Rule 1:4-4(b)*)

Mwen sètifye ke deklarasyon sila yo se la verite. Mwen konnen ke si nenpòt nan deklarasyon sa yo ta fo ak tout konesans de kòz mwen ta kab sibi sanksyon. (Sètifikasyon *Règ 1:4-4(b)*)

_____	s/
Date	Signature of Applicant
Dat	Siyati aplikan an
_____	s/
Date	Signature of Witness (Court Designee)
Dat	Siyati Temwen (deziye pa Tribinal la)