Republic of Latvia

Cabinet

Regulation No. 409

Adopted 28 June 2016

**Regulations Regarding Application of Asylum Seeker, Refugee, and Person who has been Granted Alternative Status for State Ensured Legal Aid Request**

*Issued pursuant to*

*Section 15, Paragraph four, Section 36, Paragraph five and Section 59, Paragraph four of the Asylum Law*

1. This Regulation prescribes the sample form of an application for the State ensured legal aid request submitted by an asylum seeker, a refugee and a person who has been granted alternative status (Annex 1 and 2).

2. An asylum seeker, a refugee and a person who has been granted alternative status may fill in the application in a language which he or she understands.

Acting for the Prime Minister –

Minister for Finance Dana Reizniece-Ozola

Minister for the Interior Rihards Kozlovskis

**Annex 1**

Cabinet

Regulation No. 409

28 June 2016

**Application of the Asylum Seeker for State Ensured Legal Aid Request1**

**1. Information about the person who wishes to receive State ensured legal aid**

|  |  |
| --- | --- |
| Given name (names) |  |

|  |  |
| --- | --- |
| Surname |  |

|  |  |  |
| --- | --- | --- |
| Date of the birth | https://www.vestnesis.lv/wwwraksti/BILDES/KVADRATS.GIFhttps://www.vestnesis.lv/wwwraksti/BILDES/KVADRATS.GIF. https://www.vestnesis.lv/wwwraksti/BILDES/KVADRATS.GIFhttps://www.vestnesis.lv/wwwraksti/BILDES/KVADRATS.GIF. https://www.vestnesis.lv/wwwraksti/BILDES/KVADRATS.GIFhttps://www.vestnesis.lv/wwwraksti/BILDES/KVADRATS.GIFhttps://www.vestnesis.lv/wwwraksti/BILDES/KVADRATS.GIFhttps://www.vestnesis.lv/wwwraksti/BILDES/KVADRATS.GIF. |  |
|  | (dd.mm.yyyy.) |  |

|  |  |
| --- | --- |
| Nationality |  |

|  |  |
| --- | --- |
| Personal identity number or identification number (if any) granted by the State |  |

|  |  |
| --- | --- |
| Contact details |  |
|  | (telephone number, e-mail, fax) |

|  |  |
| --- | --- |
| Address of the place of stay |  |

|  |  |
| --- | --- |
| A language which he or she understands and in which is able to communicate |  |

**2. Information about the representative of such person who wishes to receive State ensured legal aid**

|  |  |
| --- | --- |
| Given name (names) |  |

|  |  |
| --- | --- |
| Surname |  |

|  |  |  |
| --- | --- | --- |
| Date of the birth | https://www.vestnesis.lv/wwwraksti/BILDES/KVADRATS.GIFhttps://www.vestnesis.lv/wwwraksti/BILDES/KVADRATS.GIF. https://www.vestnesis.lv/wwwraksti/BILDES/KVADRATS.GIFhttps://www.vestnesis.lv/wwwraksti/BILDES/KVADRATS.GIF. https://www.vestnesis.lv/wwwraksti/BILDES/KVADRATS.GIFhttps://www.vestnesis.lv/wwwraksti/BILDES/KVADRATS.GIFhttps://www.vestnesis.lv/wwwraksti/BILDES/KVADRATS.GIFhttps://www.vestnesis.lv/wwwraksti/BILDES/KVADRATS.GIF. |  |
|  | (dd.mm.yyyy.) |  |

|  |  |
| --- | --- |
| Personal identity number or identification number (if any) granted by the State |  |

|  |  |
| --- | --- |
| Contact details |  |
|  | (telephone number, e-mail, fax) |

|  |  |
| --- | --- |
| Address of the place of stay |  |

|  |  |
| --- | --- |
| A language which he or she understands and in which is able to communicate |  |

|  |  |
| --- | --- |
| Mark whether the representative is: |  |
| https://www.vestnesis.lv/wwwraksti/BILDES/KVADRATS.GIF | legal representative (guardian, trustee) |  |
| https://www.vestnesis.lv/wwwraksti/BILDES/KVADRATS.GIF | authorised person |  |
| https://www.vestnesis.lv/wwwraksti/BILDES/KVADRATS.GIF | other |  |

|  |  |
| --- | --- |
| Representation grounds |  |

**3. Information related to the decision on the State ensured legal aid request**

|  |  |
| --- | --- |
| Decision adoption date | \_\_\_\_ \_\_\_\_ \_\_\_\_\_\_\_\_ |
|  | (dd.mm.yyyy.) |

|  |  |
| --- | --- |
| Issuing authority |  |

|  |  |
| --- | --- |
| Title of the decision |  |

|  |  |
| --- | --- |
| Number of the decision |  |

**4. Mark  if the person does not have sufficient resources to cover expenses for provision of legal aid in relation to appeal of a decision taken by the Office of Citizenship and Migration Affairs within the asylum procedure**

|  |
| --- |
| Mark whether you are: |
| https://www.vestnesis.lv/wwwraksti/BILDES/KVADRATS.GIF | person who wishes to receive State ensured legal aid |
| https://www.vestnesis.lv/wwwraksti/BILDES/KVADRATS.GIF | representative of such person who wishes to receive State ensured legal aid |

|  |  |  |  |
| --- | --- | --- | --- |
| Date |  | Signature |  |

Note. 1 Submitted by an asylum seeker who wishes to receive State ensured legal aid to appeal a decision of the State Border Guard on registering in a specific time in a structural unit of the State Border Guard or on detaining an asylum seeker, or a decision taken by the Office of Citizenship and Migration Affairs within the asylum procedure if an asylum seeker has been detained in the cases laid down in the Asylum Law and accommodated in the State Border Guard accommodation premises for asylum seekers.

Minister for the Interior Rihards Kozlovskis

**Annex 2**

Cabinet

Regulation No. 409

28 June 2016

**Application of Asylum Seeker, Refugee, and Person who has been Granted Alternative Status for State Ensured Legal Aid Request1**

**1. Information about the person who wishes to receive State ensured legal aid**

|  |  |
| --- | --- |
| Given name (names) |  |

|  |  |
| --- | --- |
| Surname |  |

|  |  |  |
| --- | --- | --- |
| Date of the birth | https://www.vestnesis.lv/wwwraksti/BILDES/KVADRATS.GIFhttps://www.vestnesis.lv/wwwraksti/BILDES/KVADRATS.GIF. https://www.vestnesis.lv/wwwraksti/BILDES/KVADRATS.GIFhttps://www.vestnesis.lv/wwwraksti/BILDES/KVADRATS.GIF. https://www.vestnesis.lv/wwwraksti/BILDES/KVADRATS.GIFhttps://www.vestnesis.lv/wwwraksti/BILDES/KVADRATS.GIFhttps://www.vestnesis.lv/wwwraksti/BILDES/KVADRATS.GIFhttps://www.vestnesis.lv/wwwraksti/BILDES/KVADRATS.GIF. |  |
|  |  | (dd.mm.yyyy.) |  |

|  |  |
| --- | --- |
| Nationality |  |

|  |  |
| --- | --- |
| Personal identity number or identification number (if any) granted by the State |  |

|  |  |
| --- | --- |
| Contact details |  |
|  | (telephone number, e-mail, fax) |

|  |  |
| --- | --- |
| Address of the place of stay |  |

|  |  |
| --- | --- |
| A language which he or she understands and in which is able to communicate |  |

|  |  |
| --- | --- |
| Mark whether the legal aid applicant is: |  |
| https://www.vestnesis.lv/wwwraksti/BILDES/KVADRATS.GIF | asylum seeker |  |
| https://www.vestnesis.lv/wwwraksti/BILDES/KVADRATS.GIF | refugee or a person who has been granted alternative status |  |

**2. Information about the representative of such person who wishes to receive State ensured legal aid**

|  |  |
| --- | --- |
| Given name (names) |  |

|  |  |
| --- | --- |
| Surname |  |

|  |  |  |
| --- | --- | --- |
| Date of the birth | https://www.vestnesis.lv/wwwraksti/BILDES/KVADRATS.GIFhttps://www.vestnesis.lv/wwwraksti/BILDES/KVADRATS.GIF. https://www.vestnesis.lv/wwwraksti/BILDES/KVADRATS.GIFhttps://www.vestnesis.lv/wwwraksti/BILDES/KVADRATS.GIF. https://www.vestnesis.lv/wwwraksti/BILDES/KVADRATS.GIFhttps://www.vestnesis.lv/wwwraksti/BILDES/KVADRATS.GIFhttps://www.vestnesis.lv/wwwraksti/BILDES/KVADRATS.GIFhttps://www.vestnesis.lv/wwwraksti/BILDES/KVADRATS.GIF. |  |
|  |  | (dd.mm.yyyy.) |  |

|  |  |
| --- | --- |
| Personal identity number or identification number (if any) granted by the State |  |

|  |  |
| --- | --- |
| Contact details |  |
|  | (telephone number, e-mail, fax) |

|  |  |
| --- | --- |
| Address of the place of stay |  |

|  |  |
| --- | --- |
| A language which he or she understands and in which is able to communicate |  |

|  |  |
| --- | --- |
| Mark whether the representative is: |  |
| https://www.vestnesis.lv/wwwraksti/BILDES/KVADRATS.GIF | legal representative (guardian, trustee) |  |
| https://www.vestnesis.lv/wwwraksti/BILDES/KVADRATS.GIF | authorised person |  |
| https://www.vestnesis.lv/wwwraksti/BILDES/KVADRATS.GIF | other |   |

|  |  |
| --- | --- |
| Representation grounds |  |

**3. Information related to the decision on the State ensured legal aid request**

|  |  |
| --- | --- |
| Decision adoption date | \_\_\_\_ \_\_\_\_ \_\_\_\_\_\_\_\_ |
|  | (dd.mm.yyyy.) |

|  |  |
| --- | --- |
| Issuing authority |  |

|  |  |
| --- | --- |
| Title of the decision |  |

|  |  |
| --- | --- |
| Number of the decision |  |

**4. Information about monies, income, properties belonging to and dependant persons of a person who wishes to receive State ensured legal aid**

1) monies that belong to a person on the day of requesting State ensured legal aid

amount \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ currency \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2) the average income of the previous three months before the date of requesting State ensured legal aid

amount \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ currency \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3) dependant persons (specify information about children, unemployed spouses, parents or grandparents, persons under guardianship or trusteeship, their date of birth and legal status in Latvia)

|  |
| --- |
|  |
|  |

|  |  |
| --- | --- |
| 4) other information |  |

|  |  |
| --- | --- |
| Mark whether you are: |  |
| https://www.vestnesis.lv/wwwraksti/BILDES/KVADRATS.GIF | person who wishes to receive State ensured legal aid |  |
| https://www.vestnesis.lv/wwwraksti/BILDES/KVADRATS.GIF | representative of such person who wishes to receive State ensured legal aid |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Date |  | Signature |  |

Note. 1 Submitted by an asylum seeker, refugee, or a person who has been granted alternative status and who wishes to receive State ensured legal aid to appeal a decision taken by the Office of Citizenship and Migration Affairs within the asylum procedure or a decision to lose or revoke refugee or alternative status, and an asylum seeker has not been detained in the cases laid down in the Asylum Law and accommodated in the State Border Guard accommodation premises for asylum seekers.

Minister for the Interior Rihards Kozlovskis