Application for NDIS Appeals Legal Services

**Before an application for legal representation can be made, an application for review must be lodged with the AAT.**

Please read the Guidelines for Assessment of Applications for NDIS Appeals Legal Services Funding before completing this form.

**You must complete all fields and answer all questions.**

The prompting questions below are to help you fill out the form.

| Abbreviations: | |
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| AAT – Administrative Appeals Tribunal  LAC – Legal Aid Commission  DSS – Department of Social Services | NDIA – National Disability Insurance Agency  NDIS – National Disability Insurance Scheme |

| **SECTION 1 – APPLICANT DETAILS** | | | |
| --- | --- | --- | --- |
| Surname: | | | |
| Given name: | | | |
| Sex: | Date of birth: | | |
| Address: | | | State: |
| Email: | | Telephone: | |
| Preferred method of correspondence (email or post): | | | |
| Date application for review lodged with AAT: | | | |
| AAT File Number (if known): | | | |
| Any dates set by the AAT (e.g. conference dates): | | | |
| Client Identifier (where a record has been created by the Support Person): | | | |

NDIS Appeals Support Person details (if applicable)

| Name: | Organisation: |
| --- | --- |
| Email: | Telephone: |

| **SECTION 2 – REASONS FOR APPLICATION FOR NDIS APPEALS LEGAL SERVICES** | | |
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| **Briefly describe the NDIA decision:**  *E.g. What is the decision?*  *What is the Act reference specified by the NDIA?* | | |
| **Background:**  *E.g. What are the relevant events leading up to the NDIA decision?* | | |
| **Why are you disputing the decision?**  *E.g. What should the NDIA have considered in their decision but did not?*  *What did the NDIA consider in their decision but should not have?*  *Which Act reference/rule gives basis for your argument?* | | |
| **Why is the case complex or novel?**  *What are you relying on under the Guidelines to support your application? (See Guidelines 4.2)* | | |
| **Additional information:**  *E.g. If a similar case has been heard by the AAT what was the case and outcome, and why is this situation different?* | | |
| **A decision in relation to this matter:**   1. will clarify an uncertain or contentious area of law in relation to the NDIS Act or rules | | YES / NO |
| 1. will resolve an important question of law arising under the NDIS Act or rules | | YES / NO |
| 1. is likely to result in improvements or beneficial changes to the administration of the NDIS | | YES / NO |
| 1. is likely to affect a significant number of participants in the NDIS. | | YES / NO |
| **SECTION 3 – CHECKLIST** | | |
| 1. Have I completed all the sections in the form? |  | YES / NO |
| 1. Have I attached a copy of the NDIA access or plan decision in dispute? |  | YES / NO |
| 1. Have I attached a copy of my application for an internal review with supporting documents? |  | YES / NO |
| 1. Have I attached a copy of the NDIA internal review decision? |  | YES / NO |
| 1. Have I attached a copy of my AAT application? |  | YES / NO |
| 1. Have I attached a copy of any other supporting documentation? |  | YES / NO |
| Please note: The information in these documents are crucial for a comprehensive assessment of the application. If you are unable to provide these documents, there may be delays in receiving a decision beyond the 30 day processing period. | | |

| **SECTION 4 – ACKNOWLEDGEMENT AND CONSENT** |
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| **AAT applicant consent**  I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **OR**  I am authorised to provide consent on behalf of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  acknowledge that I have read or understood the information provided in this referral form and give consent for:   * LAC to collect and use information as described in this referral form; * LAC to provide a copy of this referral form (including this acknowledgement and consent and any accompanying documentation) to DSS and the NDIA; * NDIA to disclose to LAC information relevant to this referral that is held in the records of NDIA; and * LAC to use this information for the purpose of sharing information with other NDIS Appeals providers to ensure consistency and for quality assurance,   for the purposes described in this referral form.  Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Printed name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_    Relationship to applicant: (if authorised to consent on behalf of another person)  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

| **SECTION 5 – SUBMIT REFERRAL** |
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| APPLICATIONS can be submitted to the following Legal Aid Commissions by emailor by post to:  Legal Aid NSW  Government Law/NDIS  (02) 9219 5790  [NDISapplications@legalaid.nsw.gov.au](mailto:NDISapplications@legalaid.nsw.gov.au)  PO Box K847  Haymarket NSW 1238  Victoria Legal Aid  Assignments Civil Coordinator  (03) 9606 5356  [assignmentscivil@vla.vic.gov.au](mailto:assignmentscivil@vla.vic.gov.au)  GPO Box 4380  Melbourne VIC 3001  Legal Services Commission of South Australia  (08) 8111 5570  [lsc.ndisgrants@lsc.sa.gov.au](mailto:lsc.ndisgrants@lsc.sa.gov.au)  GPO Box 1718  Adelaide SA 5001  Legal Aid Commission of Tasmania  1300 366 611  (03) 6236 3800  [ndis@legalaid.tas.gov.au](mailto:ndis@legalaid.tas.gov.au)  GPO Box 1422  Hobart TAS 7001  Legal Aid Western Australia  1300 650 579  [ndis@legalaid.wa.gov.au](mailto:ndis@legalaid.wa.gov.au)  PO Box L916  Perth WA 6842  Legal Aid ACT  (02) 6243 3411  [Client.services@legalaidact.org.au](mailto:Client.services@legalaidact.org.au)  GPO Box 512  Canberra ACT 2601  Northern Territory Legal Aid Commission  1800 019 343  [info@ntlac.nt.gov.au](mailto:info@ntlac.nt.gov.au)  Locked Bag 11  Darwin NT 0801  Legal Aid Queensland  1300 65 1188  [ndis@legalaid.qld.gov.au](mailto:ndis@legalaid.qld.gov.au)  GPO Box 2449  Brisbane QLD 4001  **Applications by email are preferred where possible.** |