

## Instructions

To request one 2-hour voucher, you can:

1. Complete this form online, save and **email** it to [ILAVoucher@ontario.ca](mailto:ILAVoucher@ontario.ca), or
2. Fill out the form, print and **mail** it to the address below:

Independent Legal Advice  
Ministry of the Attorney General  
OVS, Centralized Programs Delivery Unit  
720 Bay St, 5th Fl  
Toronto ON M7A 2S9

## Applicant Information

Last Name	First Name	Middle Initial	Date of Birth (yyyy/mm/dd)
-----------	------------	----------------	----------------------------

## Residential Address

Unit Number	Street Number	Street Name	PO Box
-------------	---------------	-------------	--------

City/Town	Province	Postal Code
-----------	----------	-------------

Telephone Number	Please indicate whether it is safe to leave you a voice message at this number? <input type="checkbox"/> Yes <input type="checkbox"/> No
------------------	---

Did the incident occur in the province of Ontario?

Yes  No

How would you like to receive your voucher?

Email (specify address) ► \_\_\_\_\_

Regular mail (specify address) ▼ \_\_\_\_\_

## Mailing Address

Same as Residential Address

Unit Number	Street Number	Street Name	PO Box
-------------	---------------	-------------	--------

City/Town	Province	Postal Code
-----------	----------	-------------

## Collection of Personal Information

Your personal information is being collected for the purpose of determining your eligibility for the Ministry of the Attorney General's Independent Legal Advice Program and to administer the program. The use and disclosure of your personal information will be restricted to these purposes or any consistent purpose. The Ministry will not otherwise disclose the personal information you have provided, except as required by law. Questions about the collection should be directed to the Independent Legal Advice, Ministry of the Attorney General, OVS Centralized Programs Delivery Unit, 720 Bay St. 5th Floor, Toronto, Ontario M7A 2S9, 1-844-855-8551.

I have read and understand the notice of collection of personal information.

## Affirmation

I affirm that the information contained herein is complete, true and accurate, and I as the applicant meet all the eligibility criteria.

Name	Date (yyyy/mm/dd)
------	-------------------

## Frequently Asked Questions

### What does this voucher give me?

You get access to a lawyer, by phone or video for up to four hours. You will receive two vouchers and each individual voucher number is good for one hour with a lawyer. Once you have used the first two vouchers, you may request two additional vouchers for a total of four hours. The lawyer will not represent you in court but can help you make a decision about what is best for you.

### Can I choose my own lawyer?

Yes. You will receive a package with the voucher and the names of lawyers on the referral list, their biographies and contact details to help you make your choice.

For questions regarding use of this voucher, contact the program at [ILAVoucher@ontario.ca](mailto:ILAVoucher@ontario.ca) or call 1-844-855-8551

### Who can I call if I have questions about this form?

You may send an email to [ILAVoucher@ontario.ca](mailto:ILAVoucher@ontario.ca) or call 1-844-855-8551.

Save Form

Print Form

Clear Form