

CANADA  
PROVINCE OF NOVA SCOTIA

[CR No.

Form A  
]

**SUPREME COURT OF NOVA SCOTIA**

His Majesty the King

**vs.**

\_\_\_\_\_

Print your name

**Notice of Application for ROWBOTHAM COUNSEL**

**1) Application Hearing**

Application hearing date: \_\_\_\_\_

Time: \_\_\_\_\_

Court Address:           The Law Courts  
                                  1815 Upper Water Street  
                                  Halifax, NS B3J 1S7  
                                  [change if different court]

**2) List Charges**

I make a *Rowbotham* application for the following charge(s): *(List below all charges for which you seek a lawyer)*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**3) Next Scheduled Court Date** *(example: trial date, set date, pre-trial meeting)*

\_\_\_\_\_ at \_\_\_\_\_ in \_\_\_\_\_, Nova Scotia  
*(Month/Day/Year)           (Time)                           (City/Town)*

**4) Name of party bringing application**

\_\_\_\_\_  
(Print your name)

**5) Check only one of the two boxes below:**

- I am appearing in person. My address, telephone number(s), fax or e-mail for service is as follows:

Address:

\_\_\_\_\_  
\_\_\_\_\_

Telephone Number(s): \_\_\_\_\_

Fax Number:

\_\_\_\_\_

Email:

\_\_\_\_\_

- I have a legal representative that will be appearing. The address, telephone number(s), fax or email for service of my legal representative is as follows:

Address: \_\_\_\_\_

\_\_\_\_\_

Telephone Number(s):\_\_

\_\_\_\_\_

Fax Number:

\_\_\_\_\_

Email:

\_\_\_\_\_

**6) Statement of what is being requested**

Take notice that I make application to obtain a *Rowbotham* lawyer.

### 7) Reasons for the Request

The reasons for this application are: *(Check the box of any reasons that apply to you. You can check more than one.)*

- I have been denied Legal Aid. I have appealed that decision and my appeal has also been denied.
- I have no money to hire a lawyer.
- I do not feel capable of representing myself in this matter.
- I believe this is a complex matter.
- Other, please explain

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### 8) Facts supporting the request

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### 9) Indicate below other materials or evidence you will rely on in the application

- Letter from NS Legal Aid to confirm I have been denied Legal Aid.
- Letter from NS Legal Aid to confirm that my Legal Aid appeal has been denied.
- Transcripts.
- Brief statement of legal argument.
- Affidavit(s)
- Case law
- Oral testimony (List any witnesses you will call at your application hearing)

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Other (*Please specify*)

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*(Date)* *(Your signature or your lawyer's signature)*

**10) Send to:** *(Your original completed version of this form and all original attached documents must be submitted to the court. You should make a copy of this notice and all attached documents for yourself. A copy of this notice, with copies of any attachments, must also be sent to each of the following two places by either fax or mail.)*

**Attorney General of Nova Scotia**

1690 Hollis Street  
P.O. Box 7  
Halifax, NS B3J 2L6

**Note:** All applications must be sent to this address

**Attorney General of Canada**

Suite 1400, Duke Tower  
5251 Duke Street  
Halifax, NS B3J 1P3

**Note:** Only send to the Attorney General of Canada address if you are charged with a Federal criminal offence. If you are not sure, the prosecutor, judge or another lawyer can tell you if you are charged with a Federal criminal offence.