

INTERVIEW SHEET / CLIENT'S PROFILE



Time In
(Service/
Office)

Region _____
District Office _____

Date: _____
Control No.: _____

Assigned to: _____
Referred by/Indorsed by: _____
Referred to: _____

Interviewer: _____
(Name & Signature) Public Attorney

Approved by: _____
(Name & Signature) DPA / OIC-DPA

Time In
(Lawyer)

NATURE OF REQUEST (To be filled up by PAO personnel)

Legal Advice
 Inquest Legal Assistance
 Others: _____

Legal Documentation
 Mediation/Conciliation

Representation in Court/Quasi-Judicial Bodies
 Administration of Oath

Time
Out

CLIENT'S PERSONAL CIRCUMSTANCES

(To be filled up by client / interviewee; Use another sheet of paper if there's more than one client)

Name: _____

Age: _____ Sex: _____ Civil Status: _____

Religion: _____

Educational Attainment: _____

Citizenship: _____

Language/Dialect: _____

Address: _____

Contact No.: _____

E-mail: _____

Spouse: _____

Individual Monthly Income: _____

Address of Spouse: _____

Detained: Yes No

Contact No. of Spouse: _____

Detained Since: _____

Place of Detention: _____

INTERVIEWEE'S PERSONAL CIRCUMSTANCES (To be filled up by the interviewee if the request is for another person)

Name: _____

Age: _____ Sex: _____ Civil Status: _____

Address: _____

Contact No.: _____

Relationship to Client: _____

E-mail: _____

I. NATURE OF THE CASE

Criminal Civil Labor
 Administrative Appealed

IIA. CLIENT'S CLASSIFICATION

<input type="checkbox"/> Child in Conflict with the Law	<input type="checkbox"/> Senior Citizen	<input type="checkbox"/> Foreign National: _____
<input type="checkbox"/> Woman Client <input type="checkbox"/> VAWC Victim	<input type="checkbox"/> Refugee/Evacuee	<input type="checkbox"/> Urban Poor: _____
<input type="checkbox"/> Law Enforcer <input type="checkbox"/> Drug-related Duty	<input type="checkbox"/> Tenant in Agrarian Case	<input type="checkbox"/> Rural Poor: _____
<input type="checkbox"/> OFW – Land-based	<input type="checkbox"/> Victim of Terrorism (R.A. No. 9372)	<input type="checkbox"/> Indigenous People: _____
<input type="checkbox"/> OFW – Sea-based	<input type="checkbox"/> Victim of Torture (R.A. No. 9745)	<input type="checkbox"/> PWD; Type of Disability: _____
<input type="checkbox"/> Former Rebels (FRs) and Former Violent Extremists (FVEs)	<input type="checkbox"/> Victim of Trafficking (R.A. No. 9208)	<input type="checkbox"/> Petitioner for Voluntary Rehabilitation (Drugs)



Party/Representative _____

Republic of the Philippines)
) S.c.

AFFIDAVIT OF INDIGENCY

I, _____, of legal age, single married to: _____ widow/widower
and residing at _____ and having been duly sworn in accordance with law, depose and say:

1. That I desire to avail of the free legal service of the Public Attorney's Office;
2. That my monthly net salary/income is P _____; and
3. That I am executing this affidavit to entitle me to the desired legal services.

IN WITNESS WHEREOF, I hereby affix my signature this _____ day of _____ in _____, Philippines.

Signature of Affiant

SUBSCRIBED AND SWORN to before me this _____ day of _____ in _____, Philippines.

FOR LEGAL REPRESENTATION SERVICE ONLY
(To be filled up by PAO Personnel)

IIB. CLIENT'S CASE INVOLVEMENT

- Plaintiff
- Petitioner
- Complainant

- Defendant
- Respondent
- Accused

- Oppositor
- Others: _____

III. ADVERSE PARTY

- Plaintiff/Complainant
- Defendant/Respondent/Accused

Oppositor/Others

Name:

Address:

IV. FACTS OF THE CASE (Use separate sheet if necessary)

V. CAUSE OF ACTION/NATURE OF OFFENSE

VI. PENDING IN COURT? YES NO

Title of the Case and Docket No:

Court/Body/Tribunal:

PROOF OF INDIGENCY SUBMITTED (If any)

Income Tax Return Certification from Barangay Certification from DSWD Others (payslips, etc.):

Party/Representative

Data Privacy Consent Notice and Form

The Public Attorney's Office (PAO) collects, stores and processes personal information of its clients from the time the concerned client seeks legal services from the PAO, during the course of legal assistance and representation and leading up to finality and execution of the case. This includes:

- (1) Contact information, such as name, spouse's name, address, phone number and e-mail address;
- (2) Personal information, such as age, sex, civil status, citizenship, religion, educational attainment, language/dialect, disability, employment, ethnicity, net income, and other personal information; and
- (3) Case information such as date and place of detention, nature, cause and facts of the case, involved parties, case development and other information pertinent to the case.

The above information is necessary in order to determine the qualification of a prospective client for the free legal assistance of PAO, and for continuous, effective and efficient rendition of legal service.

The interview sheet and other documents to be submitted by the client will form part of the record of the case/client folder. The information will likewise be transcribed and kept in digital format for efficient record keeping, retrieval, and updating. It will be stored in accordance with the PAO records inventory and records disposition schedule, and for as long as necessary to render the required legal assistance, reporting and monitoring purpose. It shall not be amended without prior notice to the client.

The information to be provided by the client is covered by the attorney-client privilege in so far as they pertain to the case, and given in confidence during the course of professional employment. They may only be divulged upon consent of the client, when required by law or by judicial action. Only the handling and reviewing lawyers, secretarial staff in charge of the case, PAO officials and other authorized personnel may have access to the personal information of the client. However, disclosure in pleadings, motions and other court documents may be made when necessary to advance the cause of the client, protect an interest or right, or put up a legal defense. For this purpose, the client consents to the use of personal information as may be deemed necessary by the PAO in order to provide adequate and competent legal assistance, and in compliance with monitoring and reportorial requirements.

The client has the right to reasonable access to, upon demand, the following:

- (1) Contents of one's own personal information that were processed;
- (2) Sources from which personal information were obtained;
- (3) Names and addresses of recipients of the personal information;
- (4) Manner by which such data were processed;
- (5) Reasons for the disclosure of the personal information to recipients;
- (6) Information on automated processes where the data will or likely to be made as the sole basis for any decision significantly affecting or will affect the data subject;
- (7) Date when the personal information of the concerned client was last accessed and modified;
- (8) The designation, or name or identity and address of the PIC;
- (9) Dispute the inaccuracy or error in the personal information and have the PIC correct it immediately and accordingly, unless the request is vexatious or otherwise unreasonable;
- (10) Suspend, withdraw or order the blocking, removal or destruction of one's own personal information from the PIC's filing system upon discovery and substantial proof that the personal information are incomplete, outdated, false, unlawfully obtained, used for unauthorized purposes or are no longer necessary for the purposes for which they were collected;
- (11) Be indemnified for any damages sustained due to such inaccurate, incomplete, outdated, false, unlawfully obtained or unauthorized use of personal information; and
- (12) To file a complaint before the National Privacy Commission for violation of the provisions of R.A. No. 10173 or the Data Privacy Act of 2012.

The PAO shall protect the data provided by the client in compliance with the Data Privacy Law of 2012 and its implementing rules and regulations, thru its personal information controllers (PIC) found in the various services, regional and district offices.

The undersigned is fully aware of the foregoing declarations, and understands the necessity for the PAO to collect, process and store personal information in pursuit of its mandate to render free legal assistance to its indigent and other qualified clients. Further, the undersigned abides and consents to the foregoing freely and voluntarily.

Name: _____

Signature:  _____

Date: _____