

# LEGAL

## HEALTH CHECK

Please Note: Completing this document does not create any obligation between you, the client or any legal service. The Legal Health Check identifies potential legal need. Please view the training module at [www.legalhealthcheck.org.au](http://www.legalhealthcheck.org.au) for details.

Housing  
v1.0

<b>CLIENT NAME</b>	
<b>COMMUNITY AGENCY</b>	
<b>WORKER NAME</b>	
<b>DATE</b>	
<b>LEGAL SERVICE</b>	
<b>ADDRESS</b>	
<b>APPOINTMENT TIME</b>	

## 1. Money Troubles (Debt)

Is anyone chasing you for money? Do you have payments due or unpaid accounts? E.g. phone // Centrelink // Cash converters // electricity // car loan? Complete the following details for each debt, where possible.

Would you like to access your superannuation or insurance cover? Yes/ no / Unsure (in columns)

Debt	Creditor (who you owe \$ to)	Amount owed (approx)	Instalment Payment amount and frequency	Contact Are you being contacted by phone? E.g. by debt collector?
e.g.	Telco	\$2500.00	\$100pfn	yes
1.				
2.				
#				



Please attach copy of client's Centrelink and/or bank statement if possible

## 2. Unpaid Fines and Crime

Yes No Unsure

Do you have any unpaid fines (e.g. SPER/ SDR/ CCV)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Would you like to explore your options? E.g. smaller instalments// Work orders// Waivers?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are you due in Court or have any outstanding warrants in your name?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DETAILS			

### 3. Housing Concerns

Yes No Unsure

Have you recently been evicted?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Was your tenancy bond lodged and returned?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Did you leave any belongings behind at recent accommodation?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Do you have any unpaid rent?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are you or do you want to apply for government or community housing?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are you on any tenancy blacklists e.g. TICA?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DETAILS			

### 4. Centrelink and Decision-making

Yes No Unsure

Are you receiving the appropriate Centrelink benefits?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Does the Adult Guardian look after your personal or health affairs?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Does the Public Trustee make decisions about your money?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Would you like to change or review any of these arrangements?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DETAILS			

### 5. Relationships Would you like to discuss...?

Yes No Unsure

Domestic violence orders you want, have or are subject to?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Arrangements, plans or orders about children? (e.g. who the child/ren live with, spend time with, or your involvement in major long-term issues)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
State child protection orders or concerns about you or any children?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Your rights in any personal relationship, including divorce or separation?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Concerns about your experiences as a child, while you were in the care of adults or institutions?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DETAILS			

### 6. Employment and Business

Yes No Unsure

Have you signed any business contracts which you are concerned about?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>If you are/were employed:</b>			
Are you satisfied that your wage and conditions are fair?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Did you receive all your entitlements when you left (e.g. annual leave)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Do you believe you were unfairly dismissed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DETAILS			

**Please forward this form to your community lawyer.**

For a list of local community lawyers check [www.legalhealthcheck.org.au](http://www.legalhealthcheck.org.au) for details.

**Privacy:** If you keep a copy of a completed Legal Health Check, it is subject to your organisation's privacy obligations.

