

315 GUTHRIE STREET, SUITE 300 LOUISVILLE, KY 40202-3820 T 502-581-9746 / F 844-274-0570 WWW.ACLU-KY.ORG

Instructions for Legal Assistance Request Form

Thank you for contacting the ACLU of Kentucky. Once you return the attached form to our office, we will review your information to determine if your complaint fits within our mission and that we have the resources to help you. Please be aware that this process can take six to eight weeks.

The ACLU of Kentucky offers legal assistance for cases involving <u>civil liberties violations</u> in which <u>government</u> is involved.

The ACLU of Kentucky does <u>not</u> handle:

- disputes between private parties, including private employment disputes;
- · domestic disputes, or
- child custody matters.

Due to limited resources, the ACLU of Kentucky cannot take all cases offered to us, even some concerning real injustices. If we do not take your complaint, this does not necessarily mean that you do not have a valid constitutional concern. Because we are a small organization with limited resources, we often have to make difficult decisions when choosing the types of issues that we can adequately address.

In order to expedite our intake process, do not attach any additional documentation to the complaint form. We cannot return any documents that you choose to send to us.

Please note that by accepting this request for assistance, the ACLU of Kentucky is not undertaking your legal representation and is not responsible for meeting any statute of limitations restrictions in your case. If you believe you have a potential lawsuit, you should consult with an attorney immediately to ensure that you do not lose the right to bring a legal case due to any applicable time deadlines.

Please note that the ACLU of Kentucky does not provide emergency assistance or legal consultation.

This form should be mailed to:

ACLU of Kentucky 315 Guthrie, Suite 300 Louisville, KY 40202



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Legal Assistance Request Form, Page 1

Please print, complete, and mail to:

ACLU of Kentucky 315 Guthrie St., Suite 300 Louisville, KY 40202

Complainant Information:	
Name:	
Address:	
City, State, and ZIP:	
Phone Day	_Night :
Email Address:	
My complaint is against the following:	
Name:	
Agency/Government Organization:	
Address:	
City, State, and ZIP:	
Date of Act giving rise to this complaint:	
Are you currently represented by an attorn	ey? YES NO
If yes, attorney's name:	Phone
Address:	
City, State, and ZIP:	
Has a criminal or civil lawsuit been filed ag	painst you or on your behalf? YES NO
If YES, case title and case number:	
Date filed:Court:	Judge:
Opposing Attorney:	Current status of case:



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Description of complaint (PLEASE TYPE OR PRINT CLEARLY):

Describe the events that led you to file this complaint. Please include pertinent facts, dates, persons, places, and summary of what was said or done to the complainant. DO NOT SEND ORIGINALS OR ADDITIONAL DOCUMENTATION. The ACLU of Kentucky is not responsible for the maintenance of any documentation we receive.		



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What explanation, if any, was given to you for what happened?	
Why do you think this happened to	o you?
	e this problem (for example, filed a complaint, talked to lic official, and/or other steps)? To whom did you talk, now?
	in this matter? (DO NOT SEND ADDITIONAL FOR MORE INFORMATION IF NEEDED.)
Briefly describe the action you wo	uld like the ACLU of Kentucky to take on your behalf:
Are you willing to serve as a plaint	eiff in litigation if needed? YES NO
Signature:	Date: