

UNITED STATES DISTRICT COURT  
EASTERN DISTRICT OF NEW YORK

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Plaintiff,

-against-

Defendant(s).

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**APPLICATION FOR THE COURT TO  
REQUEST COUNSEL**

\_\_\_\_\_CV\_\_\_\_\_ (     )

1. Name of applicant \_\_\_\_\_
2. Explain why you feel you need a lawyer in this case. (Use additional paper if necessary.)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
3. Explain what steps you have taken to find an attorney and with what results. (Use additional paper if necessary.)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
4. If you need a lawyer who speaks in a language other than English, state what language you speak:  
\_\_\_\_\_
5. I understand that if a lawyer volunteers to represent me and my lawyer learns that I can afford to pay for a lawyer, the lawyer may give this information to the Court. I understand that if the Court grants this application in a complaint against the Commissioner of Social Security, the pro bono attorney, if successful, has the statutory right to request that the Court award a fee of up to 25% of the accrued Social Security or Supplemental Security Income Benefits. See 42 U.S.C. § 406.
6. I understand that if my answers on my Request to Proceed *In Forma Pauperis* are false, my case may be dismissed.
7. **I declare under penalty of perjury that the forgoing is true and correct.**

Dated: \_\_\_\_\_

\_\_\_\_\_  
*Signature*

UNITED STATES DISTRICT COURT  
EASTERN DISTRICT OF NEW YORK

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**REQUEST TO PROCEED  
IN FORMA PAUPERIS  
IN SUPPORT OF THE  
APPLICATION FOR THE COURT TO  
REQUEST COUNSEL**

Plaintiff,

-against-

\_\_\_\_\_CV\_\_\_\_\_ (     )

Defendant(s).

-----X

I, \_\_\_\_\_ (print or type your name) am the plaintiff/defendant in the above-entitled case and I hereby request to proceed *in forma pauperis* and without being required to prepay fees or costs or give security. I state that because of my poverty I am unable to pay the costs of said proceeding or give security therefor, and that I believe I am entitled to redress.

1. If you are presently employed, give the name and address of your employer and state the amount of earnings per month.

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

2. If you are not presently employed, state the date you were last employed and your earnings per month at that time. **You must answer this question even if you are incarcerated.**

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

3. Have you received, within the past twelve months, any money from any source? If so, name the source and the amount of money you received.

\_\_\_\_\_

a) Are you receiving any public benefits? ☐ No ☐ Yes, \$ \_\_\_\_\_

b) Do you receive any income from any other source? ☐ No ☐ Yes, \$ \_\_\_\_\_

4. Do you have any money, including money in a checking or savings account? If so, how much?
- \_\_\_\_\_
5. Do you own any apartment, house or building, stocks, bonds, notes, automobiles or other valuable property? If the answer is yes, describe the property and state its approximate value.
- ☐ No ☐ Yes, \$ \_\_\_\_\_
6. Do you pay for rent or for a mortgage? If so, how much each month?
- ☐ No ☐ Yes, \$ \_\_\_\_\_
7. List the person(s) that you pay money to support and the amount you pay each month.
- \_\_\_\_\_
- \_\_\_\_\_
8. State any special circumstances which the Court should consider.
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

I understand that the Court may dismiss this case if I give a false answer to any question in this declaration.

I understand that if the Court grants this application in a complaint against the Commissioner of Social Security, the pro bono attorney, if successful, has the statutory right to request that the Court award a fee of up to 25% of the accrued Social Security or Supplemental Security Income Benefits. See 42 U.S.C. § 406.

**I declare under penalty of perjury that the foregoing is true and correct.**

Dated: \_\_\_\_\_

\_\_\_\_\_  
*Signature*

UNITED STATES DISTRICT COURT  
EASTERN DISTRICT OF NEW YORK

----- X

Plaintiff,

-against-

**AFFIRMATION OF SERVICE**

\_\_\_\_\_CV\_\_\_\_\_ (     )

Defendant(s).

----- X

I, \_\_\_\_\_ (print or type your name), **declare under penalty of perjury** that I have served a copy of the attached Application for the Court to Request Counsel upon the defendant(s) or the attorney for defendant(s) \_\_\_\_\_

whose address is: \_\_\_\_\_

by \_\_\_\_\_  
(describe how you served document: For example - personal delivery, mail, overnight express, etc.)

Dated: \_\_\_\_\_

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State & Zip Code