



## Family Duty Counsel / Family Advice Lawyer Form

Check one box:    Regular Duty Counsel                       Triage                       Family Advice Lawyer

<b>Lawyer Name:</b>	<b>Court:</b>	<b>Date:</b>
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**INSTRUCTIONS:**

- |  |  |
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| <ol style="list-style-type: none"> <li>1. Record the client's name.</li> <li>2. Specify unique case identifier number for each client.</li> <li>3. Specify the client's gender and the language of service.</li> <li>4. Record the other party's name.</li> <li>5. Indicate in the appropriate column for DA, FHR, FSA, IPVI, ISO, and/or SEA the service <i>LETTER</i> that corresponds to the</li> </ol> | <ol style="list-style-type: none"> <li>activity/activities provided (see legend below).</li> <li>6. Insert the appropriate <i>NUMBER(S)</i> for each outcome (see legend below).</li> <li>7. Record time spent per client.</li> <li>8. Record your total time waiting at court and travel time (if applicable).</li> </ol> |
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**LEGEND:**

<b>Activities</b>			
<b>A</b>	Spousal support application hearing	<b>L</b>	Hearing Minister of Social Development - Guardianship
<b>B</b>	Child support application hearing	<b>M</b>	Hearing Minister of Social Development - Protective Intervention
<b>C</b>	Spousal support variation hearing	<b>N</b>	Hearing Minister of Social Development - Adult Security
<b>D</b>	Child support variation hearing	<b>O</b>	Hearing Minister of Social Development - Supervisory Order
<b>E</b>	Judicial spousal support enforcement hearing	<b>P</b>	Hearing Minister of Social Development - Other
<b>F</b>	Judicial child support enforcement hearing	<b>Q</b>	Emergency Intervention Order/Emergency Protection Order Hearing for initial Order
<b>G</b>	Other	<b>R</b>	Emergency Intervention Order/Emergency Protection Order Variation Hearing
<b>I</b>	Custody application hearing	<b>S</b>	Emergency Intervention Order/Emergency Protection Order Interpretation/Advice (FAL)
<b>J</b>	Access application hearing	<b>T</b>	Substituted Service – prepare application (FAL)
<b>K</b>	Hearing Minister of Social Development - Custody	<b>U</b>	Substituted Service – hearing
<b>Outcome at this point</b>			
<b>1</b>	Adjournment	<b>21</b>	Incarceration
<b>2</b>	Provisional order (ISO and DA)	<b>22</b>	Judgment
<b>3</b>	Confirmation order (ISO and DA)	<b>23</b>	Partial payment order
<b>4</b>	Order for paternity test	<b>24</b>	Suspension of support order
<b>5</b>	Custody order	<b>25</b>	Client terminated counsel – refusal of counsel
<b>6</b>	Child support order	<b>26</b>	Order for the appointment of litigation guardian
<b>7</b>	Special expenses order under section 7 of the Federal Child Support Guidelines	<b>27</b>	Order for the appointment of counsel for litigation guardian
<b>8</b>	Spousal support order	<b>28</b>	Order for the appointment of counsel for children
<b>9</b>	Order terminating child support	<b>29</b>	Order for psychiatric or psychological evaluation
<b>10</b>	Order terminating spousal support	<b>30</b>	Warrant issued for arrest
<b>11</b>	Interim order for custody	<b>31</b>	Order to attend issued
<b>12</b>	Interim order for access	<b>32</b>	Other
<b>13</b>	Interim order for child support	<b>33</b>	Supervisory Order
<b>14</b>	Interim order for spousal support	<b>34</b>	Interim Supervisory Order
<b>15</b>	Interim order for exclusive possession of marital home	<b>35</b>	Protective Intervention Order
<b>16</b>	Marital property order	<b>36</b>	Interim Protective Intervention Order
<b>17</b>	Order for section 8 FSA custody and access evaluation	<b>37</b>	Guardianship Order
<b>18</b>	Order under section 128 FSA (no harassment etc...)	<b>38</b>	Addiction Services Outcome
<b>19</b>	Order under section 132 FSA (no contact)	<b>39</b>	Summary Advice Only
<b>20</b>	Contempt order	<b>40</b>	Order under the <i>FHR/IPVI Act</i>

**As Duty Counsel / Family Advice Lawyer**

*I have duly performed all my responsibilities, advised the clients of their rights and rendered all other services to which he/she was entitled.*

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Lawyer Signature

# CLIENTS SERVED	NAME Surname, First name & initial	COURT FILE # (FD_### - ##)	GENDER (Specify Male or Female) <input type="checkbox"/> M <input type="checkbox"/> F	LANGUAGE OF SERVICE English (E) French (F) <input type="checkbox"/> E <input type="checkbox"/> F	OTHER PARTY Surname, First name & initial / Minister of Social Development	ACTIVITIES Enter letter from service legend							OUTCOME 1	OUTCOME 2	OUTCOME 3	OUTCOME 4	OUTCOME 5	OUTCOME 6	TIME (per client)
						DA	FHR	FSA	IPVI	ISO	SEA	FLA							
1			<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> E <input type="checkbox"/> F															
2			<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> E <input type="checkbox"/> F															
3			<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> E <input type="checkbox"/> F															
4			<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> E <input type="checkbox"/> F															
5			<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> E <input type="checkbox"/> F															
6			<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> E <input type="checkbox"/> F															
7			<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> E <input type="checkbox"/> F															
8			<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> E <input type="checkbox"/> F															
9			<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> E <input type="checkbox"/> F															
10			<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> E <input type="checkbox"/> F															
<b>TOTAL TIME WAITING AT COURT:</b>			<b>TRAVEL:</b>			<b>TOTAL TIME WITH CLIENT(S):</b>													

DA – Divorce Act   FHR – Family Homes on Reserves and Matrimonial Interests or Rights Act   FSA – Family Services Act  
IPVI – Intimate Partner Violence Intervention Act   ISO – Interjurisdictional Support Order   SEA – Support Enforcement Act   FLA - Family Law Act