



މާލެ ސަރުކާރުގެ ގެޒެޓް
ދިވެހިރާއްޖޭގެ ޖުމްހޫރިއްޔާ
LEGAL REPRESENTATION REQUEST FORM

[TO BE FILLED IN CAPITAL LETTERS]

DETAILED OF THE DETAINEE
މާލެ ސަރުކާރުގެ ގެޒެޓް ދިވެހިރާއްޖޭގެ ޖުމްހޫރިއްޔާ
މަނިކު ފަންނަން
Full Name
މަނިކު ފަންނަން
Nationality
މަނިކު ފަންނަން
Date of Birth
Gender
Passport Number

DETAILED OF THE LAWYER
މާލެ ސަރުކާރުގެ ގެޒެޓް ދިވެހިރާއްޖޭގެ ޖުމްހޫރިއްޔާ
މަނިކު ފަންނަން
Full Name
މަނިކު ފަންނަން
ID / Passport No:
މަނިކު ފަންނަން
Email Address
މަނިކު ފަންނަން
Date and Time of request
Permanent Address
Present Address
Contact No:
Place of work
Legal practice license no:
I hereby accept and request to arrange the aforementioned detainee as my client.

DOCUMENTS CHECKLIST
މާލެ ސަރުކާރުގެ ގެޒެޓް ދިވެހިރާއްޖޭގެ ޖުމްހޫރިއްޔާ

1	In case of an appointment by family or sponsor or foreign mission, letter from the family, sponsor or foreign mission	
2	In case of appointment by family, Identity Document of the family member	
3	Lawyer license certificate copy	
4	ID copy of the lawyer	

NOTE
މާލެ ސަރުކާރުގެ ގެޒެޓް ދިވެހިރާއްޖޭގެ ޖުމްހޫރިއްޔާ
In case of volunteer lawyers, a letter is not mandatory.
The form shall be emailed to legal@immigration.gov.mv

OFFICIAL USE ONLY
މާލެ ސަރުކާރުގެ ގެޒެޓް ދިވެހިރާއްޖޭގެ ޖުމްހޫރިއްޔާ

DECLARATION OF DETAINEE
މާލެ ސަރުކާރުގެ ގެޒެޓް ދިވެހިރާއްޖޭގެ ޖުމްހޫރިއްޔާ
މަނިކު ފަންނަން
Full Name
މަނިކު ފަންނަން
Nationality
Passport No:
I hereby accept the aforementioned individual as my legal representative.
Form received by
RC Number
Date
Signature