SUPREME COURT LEGAL SERVICES COMMITTEE ROOM NO. 124, B-BLOCK, 1ST FLOOR, ADDITIONAL BUILING COMPLEX, SUPREME COURT OF INDIA PHONE NO. 23116353, 23116354

Ref: SCLSC/Panel/2025 Dated: 17.12.2025

CIRCULAR

As directed applications with bio-data are invited from the desirous Senior Advocates/Advocates-on-Record/Non-Advocates/Assisting Counsel for empanelment in the panel of Supreme Court Legal Services Committee.

The Senior Advocates/Advocates-on-Record/Non-Advocates-on-Record/Assisting Counsel, who are willing to be on the panel of the Committee, for the purpose of rendering legal aid, are requested to apply in the respective prescribed proforma for being considered for empanelment with SCLSC. The applications with bio-data must be sent on e-mail mentioned below on or before **15.01.2026**.

- 1. For Senior Advocate (panel.senioradvocate@gmail.com)
- 2. For Advocates-On-Record (panel.aoradvocate@gmail.com)
- 3. For Non-Advocates-on-Record (panel.nonaoradvocate@gmail.com)
- 4. For Assisting Counsel (panel.assistingcounsel@gmail.com)

Eligibility

- 1. For Senior Advocate (Any Senior Advocate).
- 2. For Advocates-on-Record (2 years experience as an Advocate-on-Record.)
- 3. For Non-Advocate-On-Record (7 years standing at Bar)
- 4. For Assisting Counsel (Experience at Bar for less than 7 year)

Note:

(i) Incomplete application shall be straightway rejected.

(ii) The Committee reserves the right to select the suitable candidates, based upon number of the applicants, by adopting an appropriate criteria for analyzing the merit of the candidates.

(iii)SeniorAdvocates/Advocates-On-Record/Non-Advocates-On-Record/Assisting Counsel who are on the present panel of SCLSC need to apply again.

(Santosh Kumar) 17-12-25 Secretary.

Copy to:

- 1. The Secretary, Supreme Court Bar Association, Supreme Court of India, with the request that the notice may be displayed on the Notice Board of the SCBA.
- 2. The Secretary, Supreme Court Advocates-On-Record Association, Supreme Court of India, New Delhi.with the request that the notice may be displayed on the Notice Board of the SCAORA.

SUPREME COURT LEGAL SERVICES COMMITTEE

FORM OF APPLICATION FOR SENIOR ADVOCATES FOR EMPANELMENT ON THE PANEL OF SUPREME COURT LEGAL SERVICES COMMITTEE-2024

Upload Photo

		Photo		
1. Name: Mr./Ms./Mrs				
First Name	Middle Nam	e Last Name.		
2. Address.	3• (★			
3. Mobile No./Nos.				
4. E-mail i.d.	1			
5. Year in which designated as Senior Advocate	S :			
6. Designated as Senior Advocate by High Court/Supreme Court				
7. I am willing to render service of the Screening Committee (Please tick)	ces on the pane	l Yes No		
8. Enrolment No.	1			
9. Name of State Bar Council where enrolled	1			
De	claration:			
I am willing to extend me panel of the Supreme Cour matter assigned to me/in the matter assigned to me/	t Legal Service	s Committee in the		
		Signature		
		Date: Place:		



APPLICATION FOR EMPANELMENT OF ADVOCATE-ON-RECORD SUPREME COURT LEGAL SERVICES COMMITTEE

		(PHOTOGRAPH)
1.	Name (in Block Letters)	:
2.	Date of enrollment as Advocate (enclose enrollment certificate)	:
3.	Name of Bar Council where enrolled.	:
4.	Language known	:
5.	Chamber No./Address of contact with telephone number/email address	:
6.	Name/address of the authorized person to whom communication can be delivered.	:
7.	Whether you have been previously on the panel of SCLSC: If Yes.	
	(i) Please provide the details about the period.	
	(ii) Whether any SCLSC case is still pending with you to be filled, if yes, provide the details.	
8.	Whether you are on the panel of other Legal Aid Authorities/Committees viz; District Legal Services Authorities/High Court Legal Services Committee, if yes, please provide the details.	:
ende	anel of Advocate-on-Record of the Supreme	cate give my willingness for inclusion of my name in e Court Legal Services Committee for the purpose of urn the brief assigned to me by SCLSC as and when
	I confirm my above address and contact no	umber.
		Signature
		Name



APPLICATION FOR EMPANELMENT OF ASSISTING COUNSEL SUPREME COURT LEGAL SERVICES COMMITTEE

		(PHOTOGRAPH)
1.	Name (in Block Letters)	:
2.	Date of enrollment as Advocate (enclose enrollment certificate)	:
3.	Name of Bar Council where enrolled.	:
4.	Language known	:
5.	Chamber No./Address of contact with telephone number/email address	:
6.	Name/address of the authorized person to whom communication can be delivered.	:
7.	Whether you have been previously on the panel of SCLSC: If Yes.	
	(iii) Please provide the details about the period.	
	(iv) Whether any SCLSC case is still pending with you to be filled, if yes, provide the details.	
8.	Whether you are on the panel of other Legal Aid Authorities/Committees viz; District Legal Services Authorities/High Court Legal Services Committee, if yes, please provide the details.	:
	I,Advo	cate give my willingness for inclusion of my name in
ende	_	Court Legal Services Committee for the purpose of urn the brief assigned to me by SCLSC as and when
	I confirm my above address and contact n	umber.
		Signature
		Name



APPLICATION FOR EMPANELMENT OF NON ADVOCATE-ON-RECORD SUPREME COURT LEGAL SERVICES COMMITTEE

	I confirm my above address and contact n	umber.
	ted by Secretary, SCLSC.	
		eme Court Legal Services Committee for the purpose eturn the brief assigned to me by SCLSC as and wher
		ocate give my willingness for inclusion of my name in
	Court Legal Services Committee, if yes, please provide the details.	
	District Legal Services Authorities/High	
8.	Whether you are on the panel of other Legal Aid Authorities/Committees viz;	:
•	(ii) Whether any SCLSC case is still pending with you to be filled, if yes, provide the details.	
	(i) Please provide the details about the period.	
7.	Whether you have been previously on the panel of SCLSC: If Yes.	
	to whom communication can be delivered.	
6.	Name/address of the authorized person	:
5.	Chamber No./Address of contact with telephone number/email address	:
4.	Language known	:
3.	Name of Bar Council where enrolled.	:
2.	Date of enrollment as Advocate (enclose enrollment certificate)	:
1.	Name (in Block Letters)	:
		(PHOTOGRAPH)