
(full name/prisoner number)

(complete mailing address)

Plaintiff/Petitioner

UNITED STATES DISTRICT COURT

FOR THE DISTRICT OF IDAHO

(full name)

Plaintiff/Petitioner,

v.

Defendant/Respondent.

(if you need additional space, use a blank page for a continuation page)

Case No.

(to be assigned by Court)

**PRISONER APPLICATION TO
PROCEED IN FORMA PAUPERIS**

By completing this Application, I am requesting in forma pauperis status rather than paying the filing fee at the time of filing. I understand that, if my request is granted in a civil rights case, my fee will not be waived, but I will be responsible to pay the entire fee from my prison trust account in increments, when and as I am able to do so. If my request is granted in a habeas corpus case, the fee will be waived.

1. Are you employed? Yes ___ No _____. If employed, please state your job title and the total amount of wages you make per month.

_____ \$ _____ per month
Job Title

2. Within the past six (6) months, have you received any money from any of the following sources?

a. Business, or other form of self-employment? Yes ___ No ___
b. Rent payments, interest or dividends? Yes ___ No ___

- c. Pensions, annuities, or life insurance payments? Yes ___ No ___
- d. Welfare, social security, or disability benefits? Yes ___ No ___
- e. Gifts or inheritances? Yes ___ No ___
- f. Friends or family? Yes ___ No ___
- g. Any other sources? _____ Yes ___ No ___

(identify source)

3. If the answer to any of the above is "yes," describe each source of money and state the amount received from each during the past six (six) months.

4. Do you own or have any interest in any real estate, stocks, bonds, notes, automobiles or other valuable property?

Yes ___ No ___. If the answer is "yes," describe the property and state its approximate value.

5. List the persons who are dependent upon your support, state your relationship to those persons, and indicate how much you contribute or are obligated to contribute, toward their support.

| Person | Relationship | Due Each Month |
|--------|--------------|----------------|
| _____ | _____ | \$ _____ |
| _____ | _____ | \$ _____ |

6. I have attached a Prison Trust Account Statement to this Form. Yes ___ No ___.

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

Executed on this ___ day of _____, _____.

Plaintiff/Petitioner

Notes: You do not need to send a copy of this document to Defendant/Respondent. This Application must be accompanied by a Prison Trust Account Statement. This Application takes the place of an in forma pauperis motion and affidavit. Notarization is not necessary because the Application is signed under penalty of perjury.