

**THE AUSTRALIAN CAPITAL TERRITORY BAR ASSOCIATION
ABN 84 008 481 258**

APPLICATION FOR GRANT OF BARRISTERS' PRACTISING CERTIFICATE

Before completing this form you should familiarise yourself with the relevant provisions of the *Legal Profession Act 2006* and *Legal Profession Regulation 2007*. The information requested on this form will be used to process your application for your practising certificate and to maintain the register of holders of ACT practising certificates required by s79 of the *Legal Profession Act 2006* as well as to carry out the Association's functions under the Act and Regulations. The register includes the name of the legal practitioner, contact details of the office of the practice (street address, postal address and DX) and certain conditions imposed on the practicing certificate. The register is available for inspection by the public.

Professional Indemnity Insurance

All Barristers' Practising Certificates are issued on the basis that the applicant will be the holder of an approved policy of Professional Indemnity Insurance (minimum cover \$1.5 million) pursuant to s312(1)(a) and (b)(1) of the Act. PII policies are approved by the Bar Council each practising year and are published on the Association's website.

PART ONE - PERSONAL DETAILS

FAMILY NAME: _____

GIVEN NAMES: _____

PREVIOUS FAMILY NAME (if applicable): _____

PREFERRED FORM OF ADDRESS: _____
(For mailing/website purposes eg. Mr J Harry Smith/Mr J H Smith SC)

DATE OF BIRTH: _____ **GENDER:** _____

PRACTICE DETAILS

YEAR OF ADMISSION: _____

CHAMBERS: _____ CLERK'S NAME: _____

BUSINESS ADDRESS: _____
Please note that a post office box is not a practice address

DX No: _____ State: _____

AUSTRALIAN BUSINESS NUMBER (ABN): _____

CHAMBERS PH: _____ FAX: _____

MOBILE: _____ (Not for Publication)

*E-MAIL: _____

* The Bar Association regularly sends e-mails to members of the Bar Association who have provided it with their e-mail address. Material sent by e-mail includes *Circulars, Notice to Practitioners, Request for Submissions and Memorandums, Updates on Continuing Professional Development seminars and social functions*. Because much of the information e-mailed needs to be disseminated at a short notice, there is no other feasibility to distribute the information more efficiently.

If you **do not** wish to receive broadcast e-mails from the Association, please indicate clearly below.

I do **NOT** wish to receive broadcast e-mails from the Association []

RESIDENTIAL ADDRESS (not for publication‡):

STATE: _____ **POSTCODE:** _____

PHONE: _____

‡ We ask that you provide details of your residential address and phone number. The information provided will be used only in exceptional circumstances by the Bar Council and the Bar Association staff. **It will not be made generally available without your written consent unless it is also your practice address.**

Do you identify as an Aboriginal or Torres Strait Islander person?* YES / NO

*An Aboriginal person or Torres Strait Islander is a person who is of Aboriginal or Torres Strait Islander descent, identifies as an Aboriginal or Torres Strait Islander person, and is accepted by an Aboriginal or Torres Strait Islander community as an Aboriginal person or Torres Strait Islander.

If YES, do you consent to your profile on the Bar Association’s ‘Find a Barrister’ Directory being linked to the ABA’s ‘Indigenous Barristers Directory’?

YES / NO

PART TWO

PROFESSIONAL DETAILS

2.1 Please give details of your tertiary academic qualifications:

(a) Academic qualifications in law

| Qualification | Name of Institution | Year Awarded |
|---------------|---------------------|--------------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |

(b) Other academic qualifications

| Qualification | Name of Institution | Year Awarded |
|---------------|---------------------|--------------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |

2.2 Please list any other languages that you speak and can confidently use in place of English when dealing with a person who speaks little or no English:

2.3 Which of the following most describes your CURRENT profession?

(Please tick only one category)

- Student (just been admitted to practice);
- Practising as a solicitor in the Australian Capital Territory;
- Practising as a barrister in another state or territory;
- Practising as a solicitor or solicitor and barrister in another state or territory;
- Practising within the Office of the DPP, AGS, GSO, Parliamentary Counsel, ODMP, Defence Legal. **(Please circle one).**
- Other. Please specify: _____

2.4 Will practising as a barrister in the ACT be your principal endeavour?

- YES NO

2.5 If not, what portion of your time do you expect to spend practising as a barrister in the ACT? Please provide details:

2.6 Date admitted in any Australian Jurisdiction as a Barrister/Solicitor/Legal Practitioner:

State/Territory: Date:

A copy of your certificate of admission MUST be enclosed with this application

2.7 Please provide details of other countries in which you are eligible to practise:

2.8 Is your admission in any other jurisdiction subject to any conditions?

YES NO [If YES, please provide details]

2.9 Have you previously applied for or held any ACT practising certificate?

YES NO

If YES, please attach copy of your last PC and a Certificate of Fitness from the issuing Authority.

2.10 Have you previously applied for or held any practising certificate/s in any other Australian state or territory?

YES NO

If YES, please provide details together with a Certificate of Fitness (the certificate is to be no older than 2 months) from each Authority that has issued you with a practising certificate.

2.11 If you hold a current practising certificate, is it subject to any conditions?

YES NO If YES, please provide details.

2.12 Have you ever been refused a practising certificate?

YES NO If YES, please provide details.

2.13 If the ACT will not be your principal place of practice during the currency of the practising certificate applied for, please advise which State/Territory will your principal place of practice and the basis upon you are eligible for an ACT practising certificate [s41(2)(a)(i) of the *Legal Profession Act 2006*]

2.14 On what date do you wish to commence to practise at the ACT Bar?

Your ACT practising certificate will be issued as of that date, if all documentation is in order and the Bar Council has determined to grant the practising certificate by that date. Please note that practising certificates cannot be backdated.

PUPILLAGE

2.15 Have you previously undertaken pupillage or any part of the Reading Program?

YES **NO**

If YES Please provide details and proof of completion.

2.16 Have you been appointed Queen's Counsel or Senior Counsel in another jurisdiction?

YES **NO**

If YES, please state jurisdiction, date of appointment and a copy of your certificate

2.17 Have you been approved as a Mediator by the Supreme Court of the ACT?

YES **NO**

If YES, please attach copy of the formal approval issued by the Chief Justice of the Supreme Court of the ACT.

PART THREE

DISCLOSURE OF OFFENCES AND BANKRUPTCY MATTERS

The *Legal Profession Act 2006* requires disclosure of show cause events (serious offences, tax offences and certain bankruptcy matters). In addition Rule 115 of the *Barrister's Rules* requires disclosure of show cause events (serious offences, tax offences and certain bankruptcy matters).

3.1 Have you ever been convicted (conviction includes a finding of guilt or the acceptance of a guilty plea, whether or not a conviction is recorded) of a serious offence or a tax offence?

- YES NO If YES, you must provide details of the event and a statement explaining why, despite the event, you consider yourself to be a fit and proper person to hold an ACT practising certificate.

3.2 Have you ever been convicted (conviction includes a finding of guilt or the acceptance of a guilty plea, whether or not a conviction is recorded) of any offence than an excluded offence?

- YES NO If YES, you must advise the details of the offence, including the date of the offence and any penalty imposed.

3.3 Have you, at any time in the last ten (10) years, been the subject of any of the following disclosable events:

- (a) the making of a sequestration order, or the filing of a debtor's petition, pursuant to the *Bankruptcy Act 1966* (Cth)?

YES NO

- (b) the entry into a debt agreement pursuant to Part IX of the *Bankruptcy Act 1966* (Cth), or an agreement, composition or arrangement pursuant to Part X of that Act?

YES NO

- (c) disqualification from managing or being involved in the management of any body corporate under any law in force in any jurisdiction within Australia, including disqualification from managing corporations under Part 2D.6 of the *Corporations Act 2001*?

YES NO

(d) conviction of an offence under any law in force in Australia, or in any overseas country, or a finding that such an offence is proved against the applicant, where the maximum penalty for the offence is a term of imprisonment of 12 months or more, or where fraud or dishonesty is an element of the offence?

YES NO

(e) are you aware of any facts or circumstances which might affect your fitness to remain a legal practitioner, including non-compliance with any obligation under the *Income Tax Assessment Act 1936*?

YES NO

If YES to any of questions 3.3(a) to (e), please attach full details under a separate attachment.

PART FOUR

FITNESS AND PROPRIETY

Apart from matters disclosed in accordance with Part Three:-

4.1 Have you done anything likely to adversely affect your good fame and character?

YES NO

If YES, please attach a written statement disclosing the matters.

4.2 Are you aware of any facts or circumstances which might affect your fitness to become or remain a legal practitioner, including non compliance with any obligation under the *Income Tax Assessment Act 1936*?

YES NO

If YES, please attach a written statement disclosing the matters.

4.3 Are you aware of any facts or circumstances which might affect your fitness to become or remain a legal practitioner, including non-compliance with any obligation under any applicable taxation or revenue legislation?

YES NO

If YES, please attach a written statement disclosing the matters.

4.4 Have you been charged with serious offence as defined in the *Legal Profession Act 2006*?

YES NO

If YES, please attach a written statement setting out details of the charge.

4.5 Have you had, or is there currently, any complaint lodged against you as a legal practitioner, whether in the Australian Capital Territory or any other jurisdiction, not previously disclosed to the ACT Bar Association the ACT Law Society or a Corresponding Authority as defined in the Act?

YES NO

If YES, please attach full details including outcome if known.

PROVISION AND USE OF PROFESSIONAL DETAILS FOR PUBLICATION

Information about you is collected, stored, used and disclosed by the Australian Capital Territory Bar Association in accordance with the *Privacy Act 1988* (Cth).

Information provided by you to the Association will be used by the Association in carrying out its functions under the *Legal Profession Act 2006*.

The Association may also disclose information to other regulatory authorities in other jurisdictions in accordance with the *Legal Profession Act 2006*.

Each year, for the purposes of the NSW Law Society diary and the Australian Legal Directory, the Association provides the contact details of every barrister who is a Class A member of the Association and holds an Australian Capital Territory Barrister's Practising Certificate. The details provided include the barrister's name, business address (including DX), phone and fax numbers, date of commencement of practice and email address.

The Association provides the information for this publication as it is a matter of public record and does not include personal or sensitive information about any individual barrister.

The Association also provides you practice contact details to members of the public on request (including information you have provided regarding your contact details, practice areas, other languages spoken and other jurisdictions where you have been admitted). **No personal or sensitive information is provided to the public.**

Information provided by members will also be used to maintain membership records. Your practice details will, if you have agreed appear on the Association's "Find a Barrister" webpage which allows members of the public and solicitors to search for a barrister suited to their particular need.

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|------------------------------|
| STATUTORY DECLARATION |
|------------------------------|

I, _____ of _____

do solemnly and sincerely declare that, the information and particulars set forth in the above application for a Practising Certificate are true in substance and in fact and I make this solemn declaration conscientiously believing the same to be true, and by virtue of the provisions of the *Oaths and Affirmations Act 1984*.

Declared this _____ day of _____ in the year _____

at _____ in the State of _____

before me

WITNESS (Delete as appropriate)
JUSTICE OF THE PEACE/NOTARY PUBLIC
SOLICITOR/BARRISTER

APPLICANT

I, _____ the above witness, certify that:

1. I saw the face of the declarant/deponent,
2. I have known the person for at least 12 months, or
3. I have confirmed the person's identity with _____

Schedule of Barristers' Practising Certificate**Fees Effective 1 July 2020****(PC Fees are exempted from GST)**

| Seniority | Current PC Fees |
|------------------------------------|------------------------|
| Silk | \$3,390.00 |
| Junior 13+years | \$2,712.00 |
| Junior 6 – 12 years | \$2,265.00 |
| Junior 3 – 5 years | \$1,560.00 |
| Junior 1 – 2 years | \$1,260.00 |
| Readers | \$532.00 |
| Statutory Office PC Holders | \$587.00 |