

**Application for issue of an**

**Unrestricted Volunteer Practising Certificate (UPC)**

THIS IS AN APPLICATION FOR A VOLUNTEER ACT PRACTISING CERTIFICATE AS A SOLICITOR BY:

**(Print your full name in block letters)**

FOR THE YEAR ENDING 30 JUNE \_\_\_\_

**(‘The relevant practice year’)**

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Title:** |  | | **Full Given Names :** | |  | | | **Surname:** | |  |
|  | | | |  | | |  | |  | |
| **Preferred First Name:** | | | |  | | | | **Former Name:** | |  |
|  | |  |  | | |  |  | | | |
| **Honorific:** | | | |  | | | | **Aboriginal/Torres Strait Islander (Yes/No):** | |  |
|  | |  |  | | |  |  | | | |
| **Date of Birth:** | | | |  | | | | **Original Admission Date:** | |  |
| **Member ID/Roll Number:** | | | |  | | | | **Admission State/Territory:** | |  |
|  | |  |  | | |  |  | | | |
| **Primary Email Address:** | | | |  | | | | **Receive updates by email (Yes/No):** | |  |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Postal Address:** | |  | | | | | | |
| **Postal Suburb:** | |  | | |  | |  | |
| **Postal State:** | |  | | | **Postcode:** | |  | |
| **Home Phone:** | |  | | | **Mobile Phone:** | |  | |
| **Languages Spoken (if any)** | | |  | | | | | |
|  | | |  | | the law society of the australian capital territory  level 4 1 farrell place canberra act 2601  GPO Box 1562 canberra act 2601  DX 5623 canberra  Ph: 02 6274 0300  [register@actlawsociety.asn.au](mailto:register@actlawsociety.asn.au)  [www.actlawsociety.asn.au](http://www.actlawsociety.asn.au)  a member of the law council of Australia | |

Note: Unless otherwise specified, section numbers refer to the *Legal Profession Act 2006* and *Legal Profession Regulation 2007*.

1. I apply for the issue of **an Unrestricted Volunteer Practising Certificate** under the *Legal Profession Act 2006*authorising me to engagein legal practice in the ACT as a volunteer providing pro bono services for the relevant practice year.
2. I am admitted as an Australian lawyer (ss 7 and 41(1)).
3. I understand it is a condition of this volunteer certificate that I will only engage in legal practice as a volunteer at:

* a community legal centre
* Legal Aid ACT
* the Aboriginal Legal Service (NSW/ACT)
* the ACT Law Society’s Legal Assistance Bureau
* the Pro Bono Clearing House
* and/or any other entity approved by the Council of the Law Society of the ACT. Applicants must apply to the Law Society of the ACT for approval prior to commencing the volunteer legal practice.

1. I understand it is a condition of this volunteer certificate that I will not:

* engage in private practice; or
* act as:
  + a director of an incorporated practice
  + a partner in a law firm
  + a partner of a multi disciplinary partnership
  + a supervising legal practitioner at a community legal centre
  + a sole practitioner; or
* receive trust money (s 47).

1. If I am successful in this application, I will not hold a practising certificate in another State or Territory from the time I am granted this certificate until this certificate expires or is surrendered (ss 35(3)).
2. Name of the organisation at which I will be volunteering:

The street address of the organisation is:

The postal address (if different) is:

DX

\*Signed Notification from Organisation form must be attached to this application.

**VOLUNTEER INSURANCE DETAILS**

1. I am aware that this practising certificate is issued on the basis that the organisation at which I am volunteering is the holder of an approved policy of Professional Indemnity Insurance for the duration of this practising certificate (s 312A). Accordingly I advise that the organisation’s Professional Indemnity Insurance is through the following company (please tick the relevant insurer):

|  |  |  |
| --- | --- | --- |
|  |  | CGU (National Association of Community Legal Centres Inc) |
|  |  |  |
|  |  | Arthur J Gallagher & Co |
|  |  |  |
|  |  | Law Cover |
|  |  |  |
|  |  | Legal Aid |
|  |  |  |
|  |  | Legal Practioners' Liability Committee |
|  |  |  |
|  |  | National Pro Bono Professional Indemnity Insurance Scheme (NPBRC). |

**MANDATORY CONTINUING PROFESSIONAL DEVELOPMENT (CPD)**

1. Holders of volunteer practising certificates must complete at least 5 units of Continuing Professional Development between 1 April and 31 March each year (CPD year), ahead of the conclusion of the relevant practice year. At least one unit must be completed in each of the following core areas:
2. Legal ethics and professional responsibility
3. Professional skills
4. Substantive law and procedural law.

Practitioners must keep their own CPD records and supporting documentation. Random audits are conducted by the Society.

I understand that it is a condition of this practising certificate that I must complete at least 5 CPD units **in the relevant CPD year.**

**Note:** If this practising certificate is issued part-way through the CPD year, your CPD obligations will be pro-rated (Guideline 13, CPD Guidelines).

**OTHER NOTIFIABLE INFORMATION**

1. I understand that it is a condition of this practising certificate that I must notify the Law Society of the ACT as soon as is reasonably practicable every time my details change or I cease to be a volunteer (s 47).
2. I understand that I must notify the Law Society of the ACT in writing within 7 days if I am charged with a “serious offence” (defined in the Dictionary to the Act) or if I am convicted of any offence that would require disclosure under the admission rules in relation to an application for admission to the legal profession under the Act (s 51).
3. I understand that I must **attach** to this application a written statement about any “**show-cause events**” (defined in the Dictionary to the Act) that have occurred in relation to me since my admission to the legal profession and that have not been previously notified to the Law Society of the ACT. The written statement must explain why, despite the show-cause event or events, I consider myself to be a fit and proper person to hold a practising certificate (s 60). Should a “**show-cause event**” occur while I am holding this practising certificate, I must give the Law Society of the ACT written notice within 7 days of the event and further information with 28 days (s 61).
4. I understand that the Law Society of the ACT cannot grant me a volunteer practising certificate unless satisfied that I am a ‘fit and proper person’ to hold the certificate (ss 44(3) and (4)). Sections 11 and 36 contain criteria that are relevant to whether a person is a ‘fit and proper person’.

I have read and understand the points listed above in relation to notifiable information. **(*you must tick this box)***

***Tick one of the boxes below as applicable***

This application form contains all relevant information as to whether I am a ‘fit and proper person’.

**OR**

I have **attached** a statement containing all additional relevant information.

1. The table in Regulation 10 sets out criteria that must be met by applicants for an Unrestricted Practising Certificate. The **attached** statutory declaration identifies the item number and outlines how I meet the qualification under that regulation.

**ADDITIONAL PRACTISING CERTIFICATE INFORMATION**

Tick the relevant box below:

|  |  |
| --- | --- |
|  | I currently hold, or within the last five years held, an ACT Unrestricted Practising Certificate issued by the Law Society of the ACT. |
|  |  |
|  | I currently hold a practising certificate issued by (enter current jurisdiction)  ­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ and I have attached a copy. |
|  |  |
|  | I do not currently hold a practising certificate but have been admitted as a solicitor to the Supreme Court and I have attached a copy of my admission certificate. |
|  |  |
|  | I previously held an ACT practising certificate between the following dates:  From:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ To:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  |  |

**I declare that the information contained in or with this application is true and correct and that I have not omitted any relevant information**.

Applicant’s Signature: ………………………………………………… Dated: ……………………………

**APPLICATION FOR A VOLUNTEER PRACTISING CERTIFICATE**

**- NOTIFICATION FROM ORGANISATION**

*All applicants for a volunteer practising certificate issued by the Law Society of the ACT must have the organisation at which they will be volunteering complete this form. The completed form must be attached to the application for a volunteer practising certificate.*

**Please print all requested information clearly.**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *(insert name)*, of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *(insert name of organisation)*, confirm that \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *(insert name of volunteer)*, will be engaging in legal practice as a volunteer at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *(insert name of organisation).*

It is anticipated that the volunteer will commence their volunteering work on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *(insert date)* and that he/she will be volunteering for approximately \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ hours per week over the period \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *(insert date)*, through to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *(insert date)*.

Throughout this period, the volunteer will be supervised by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *(insert name of supervisor)*.

I confirm that the volunteer will be covered by the organisation’s professional indemnity insurance policy throughout the period they are volunteering. The organisation’s professional indemnity insurance is provided by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *(insert name of insurer)*.

I confirm that the volunteer will not be remunerated by the organisation for their volunteering work.

Signed by

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *(insert date)*.