actlawsociety

APPLICATION FOR ISSUE OF A

RESTRICTED PRACTISING CERTIFICATE (RPC) FOR A PRACTITIONER NOT RESIDING IN AUSTRALIA

	THIS IS AN APPLICATION FOR AN A.C.T. PRACTISING CERTIFICATE AS A SOLICITOR BY:	
	(Print your full name in block letters)	
	FOR THE YEAR ENDING 30 JUNE 2015	
Please tick	the box indicating whether you are in category A, B or C.	
□ <u>A: Ap</u>	plication for the RENEWAL of an ACT Restricted Practising Certificate	
certificate v	ently hold an ACT restricted practising certificate or have held an ACT restricted practising the last 5 years, and you would like to hold a restricted practising certificate fune 2015, complete Parts 1 and 2 .	_
□ <u>B: Ap</u>	plication for a FIRST ACT Restricted Practising Certificate	
•	e not previously held an ACT restricted practising certificate and would like to hold certificate for the year ending 30 June 2015, complete Parts 1 and 3 .	a restricted
	oplication for an ACT Restricted Practising Certificate if your previous ACT R	<u>estricted</u>
<u>Pr</u>	actising Certificate EXPIRED 5 years ago or longer.	
•	an ACT restricted practising certificate that expired 5 years ago or longer and you vestricted practising certificate for the year ending 30 June 2015, complete Parts 1 and 1	

the law society of the australian capital territory third floor 11 london circuit canberra act 2601 gpo box 1562 canberra act 2601

dx 5623 canberra

telephone 02 6247 5700 facsimile 02 6247 3754 register@actlawsociety.asn.au www.actlawsociety.asn.au a member of the law council of Australia

Approved form AF2014-36 - Application for issue of a restricted practising certificate - (RPC) - Legal Profession Act 2006 section 587(1), for the purposes of section 42(1)(b).



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

PART	RT 1 – ALL APPLICANTS TO COMPLETE		
Title	Title Full name (please print)		Member ID:
1. I,			
of (resi	residential address):		
Suburb	urb State		Postcode
Phone	ne No: (BH) (AH)	Mobile)	
Email:	ail: (Work)		
Email:	ail: (Home)		
Postal	tal address (if differs from residential/office address):		
authori	ly for the issue of a Restricted Practising Certinorising me to engage in legal practice for the year end I am admitted as an Australian lawyer (ss 7 and 41) It is a condition of this certificate that I will not practic	ling 30 June 20	O15.
Т	If I am successful in this application, I will not hold a Territory from the time I am granted this certificate u (ss 35(3)).		
5. I	I practise / will practise as an employee of:		
Ţ	The physical address(es) at which I practise / will practise	actise principal	ly is / are
T	The postal address (if different) is		
			X



OTHER NOTIFIABLE INFORMATION

- 6. I understand that it is a condition of this practising certificate that I must notify the ACT Law Society as soon as is reasonably practicable every time my practice details change (<u>s 47</u>).
- 7. I understand that I must notify the ACT Law Society 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)
- 8. 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 ACT Law Society. 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 (<u>s 60</u>). Should a "**show-cause event**" occur while I am holding this practising certificate, I must give the ACT Law Society written notice within 7 days of the event and further information with 28 days (<u>s 61</u>).
- 9. I understand that the ACT Law Society cannot grant me a 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'.
 - (a) This application form contains all relevant information as to whether I am a 'fit and proper person';

OR

- (b) I have **attached** a statement containing all additional relevant information.
- 10. I understand that it is a condition of this practising certificate that I must complete 10 CPD units between 1 April 2014 and 31 March 2015.

Note: if this practising certificate is issued part-way through the CPD year, your CPD obligations will be pro-rated (unless, immediately prior to this issue of this practising certificate, you held a practising certificate in another Australian jurisdiction, in which case you will be expected to complete 10 CPD units).

Note: you must keep your own CPD records and supporting documentation in case of audit.

PART 2 – RENEWAL APPLICANTS ONLY TO COMPLETE

11. I currently hold, or within the last five years held, an ACT restricted practising certificate issued by the ACT Law Society. (applicant to initial)

actlawsociety

12.	(a) I I	have fulfilled the mi	inimum	CPD requirements	s for the 2013 –	2014 CPD	-		
	Ol	B					(appli	cant to initia	al)
	O.	N.							
	(b) I	have not fulfilled th	e minim	num CPD requirem	ents for the 201	3 – 2014 0	-	ar. cant to	
	grant throu requi you h	: if you were required by the ACT Lawagh the CPD year) arements. If you we have also fulfilled the if you have not fulption or extension	w Socie and you re grant ne requin	ty or because you have completed to sed an extension or rements.	r current practis hose units, you a f time and have	sing certifications are still dead now comp	ate was emed to leted y	s issued pa have fulfil our require	art-way lled the ed CPD
	Note	: you must keep yo	our own	CPD records and	supporting docu	ımentation	in case	of audit.	
PA	RT 3		OR IF	IF THIS IS YOU YOUR PREVIO RED FIVE YEAR	US ACT REST	RICTED			ING
12.	(a)	I currently hold a attach a copy;	Insert cate		practising certi		•	y, you mu	st
	OR								
		I do not currently h	old a pr	racticing cortificate	Lwae originall	v admittad	as a [
	(D)	of the Supreme Co	•	•	. I was originali	-			
			ourt or		convert vour		on	iooto)	
		Roll No:		(Please attach a	copy or your A	Aumssion	Certiii	icate)	
13.	-	eviously held an AC ease complete onl	-	-		until	ertific	ate).	
14.	Opt	ional: I identify as A	Aborigin	al or Torres Strait	Islander. \square				
		eclare that the inf t I have not omitte				plication is	s true	and corre	ct and
App	licant	's Signature:				Dated:			