

# RENEWAL 2020-2021

## Barrister Practising Certificate

Pursuant to s45 of the *Legal Profession Act 2006* (ACT)

### PART 1

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 renewal of 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 practising certificate. The Register is available for inspection by the public.

### PERSONAL DETAILS

I,

TITLE	FULL NAME		
OF (RESIDENTIAL ADDRESS):			
SUBURB	STATE	POSTCODE	
PHONE	MOBILE		
WORK EMAIL	HOME EMAIL		

apply for the issue of a renewed **Barrister Practising Certificate** under the *Legal Profession Act 2006* (the Act) and the *Legal Profession Regulation Act 2007* authorising me to practise as a Barrister at the Private Bar for the year ending **30 June 2021**.

### PRACTICE DETAILS

I practise / will practise at the Private Bar

NAME OF

CHAMBERS

BUSINESS ADDRESS

Note: Post Office Box is not a Practice Address

OR

AS AN EMPLOYEE OF AGS, GSO, OPC, PCO, DPP OR DEFENCE LEGAL PLEASE

SPECIFY THE PHYSICAL ADDRESS/ES AT WHICH I PRACTISE / WILL PRACTISE PRINCIPALLY IS /

ARE



**PRACTICE DETAILS CONTINUED**

Is the Australian Capital Territory currently your principal place of practice? ☐ Yes ☐ No

If **No** please provide details

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Have you been admitted to practice in any other country since your last application? ☐ Yes ☐ No

If **Yes** please provide details

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Do you expect to be engaged in legal practice principally in *The Australian Capital Territory* during the currency of the practising certificate applied for? ☐ Yes ☐ No

If **No** please provide details

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I currently hold a valid ACT Barrister Practising Certificate ☐ Yes ☐ No

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In which country were you born?

- |                                          |                                   |                                 |                                           |                              |
|------------------------------------------|-----------------------------------|---------------------------------|-------------------------------------------|------------------------------|
| <input type="radio"/> Australia          | <input type="radio"/> New Zealand | <input type="radio"/> UK        | <input type="radio"/> Republic of Ireland | <input type="radio"/> China  |
| <input type="radio"/> South Africa       | <input type="radio"/> Malaysia    | <input type="radio"/> Hong Kong | <input type="radio"/> India               | <input type="radio"/> Canada |
| <input type="radio"/> Sri Lanka          | <input type="radio"/> Fiji        | <input type="radio"/> USA       | <input type="radio"/> Lebanon             | <input type="radio"/>        |
| <input type="radio"/> I'd rather not say | <input type="radio"/> Other       |                                 |                                           |                              |
- 

What is your ancestry? (Provide up to **TWO** ancestries only)

- |                                                                |                                                 |                                                             |                                     |                                  |
|----------------------------------------------------------------|-------------------------------------------------|-------------------------------------------------------------|-------------------------------------|----------------------------------|
| <input type="checkbox"/> Australia                             | <input type="checkbox"/> English                | <input type="checkbox"/> Irish                              | <input type="checkbox"/> Scottish   | <input type="checkbox"/> Italian |
| <input type="checkbox"/> Greek                                 | <input type="checkbox"/> Indian                 | <input type="checkbox"/> Chinese                            | <input type="checkbox"/> Aboriginal |                                  |
| <input type="checkbox"/> Aboriginal and Torres Strait Islander | <input type="checkbox"/> Torres Strait Islander |                                                             |                                     |                                  |
| <input type="checkbox"/> I'd rather not say                    | <input type="checkbox"/> Other                  | <i>Examples of 'Other' include Vietnamese and Lebanese.</i> |                                     |                                  |
- 

Are you of Aboriginal or Torres Strait Islander origin?

- ☐ Yes – Aboriginal ☐ Yes – Torres Strait Islander ☐ Yes – both Aboriginal and Torres Strait Islander
- ☐ No ☐ I'd rather not say
- 

I understand that it is a condition of this Practising Certificate that I notify the *ACT Bar Association* as soon as it is reasonably practicable, if my practice details change.

**Applicant's Signature**

**Date**

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## PROFESSIONAL INDEMNITY INSURANCE DETAILS

This Barrister Practising Certificate is issued on the basis that I am the holder of an approved policy of **Professional Indemnity Insurance, minimum cover \$1.5 million** for the duration of this practising certificate pursuant to s312(1)(a) and (b)(i) of the Act.

Accordingly, I have effected Professional Indemnity Insurance with

COMPANY NAME

DATE COVER BOUND (WHEN PREMIUM PAID)

 Please upload / attach a copy of the certificate of currency for your PII for the practice year **2020/21**.  
***If certificate is currently unavailable, please provide copy ASAP.***

## NOTIFIABLE INFORMATION

1. I understand that I must notify the ACT Bar Association 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 (s51).
2. 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 Bar Association. 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 (s60). Should a **show-cause events** occur while I am holding this practising certificate, I must give the *ACT Bar Association* written notice within 7 days of the event and further information with 28 days (S 61).

**Please complete Part 3 of this Application.**

3. I understand that the ACT Bar Association cannot grant me a Barrister Practising Certificate unless satisfied that I am a 'fit and proper person' to hold the certificate pursuant to ss45(3)(b) and (4)(b) of the Act.

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.

**Applicant's Signature**

**Date**

**Please complete Parts 2, 3, 4 and sign Declaration.**

**PART 2**
**CONTINUING PROFESSIONAL DEVELOPMENT (CPD)**

**ACT Bar Association Bar Council's resolution of 1 July 2014 pursuant to Rule 113 of the Legal Profession (Barristers) Rules 2008.**

Holders of The Australian Capital Territory barristers' practising certificates are required to have obtained **10 CPD points for the period 1 April to 31 March**, with at least one point in each of the *four strands\** namely:

- a) Ethics and Regulation of the Profession;
- b) Management;
- c) Substantive Law, Practice and Procedure and Evidence;
- d) Advocacy, Mediation and Other Barrister Skills.

**Exemptions or Reductions in required CPD Points**

A barrister who, at **31 March** in a given CPD year, has held a Practising Certificate for a period of time less than from the preceding July has their CPD points requirement reduced as indicated below:

MONTH	POINTS	MONTH	POINTS	MONTH	POINTS
January	1	August	6	November	3
February	1	September	5	December	2
March–July	0	October	4		

Have you obtained the requisite CPD points in the period **1 April 2019 to 31 March 2020**? ☐ Yes ☐ No



**If No please attach/upload a written statement of reasons for not accumulating the requisite CPD points.**

**\*For details of the four strands, see information about CPD at [actbar.com.au](http://actbar.com.au)**

Please **ensure that you have kept a written record** of how these CPD points have been accumulated as you may be required to produce this. Any questions regarding CPD should be directed to the Chief Executive Officer on 02 6257 1437 or email [ceo@actbar.com.au](mailto:ceo@actbar.com.au).

## PART 3

## DISCLOSURES OF OFFENCES AND BANKRUPTCY

Sections 60 and 61 of the *Legal Profession Act 2006* require disclosure to the Bar Council of show cause events (serious offences, tax offences and certain bankruptcy matters) and convictions (other than for an 'excluded offence'). Barristers must also notify Council if charged with a serious offence.

**Note: disclosure/notification is not required if you have previously disclosed the information to the Bar Council.**

Please answer All Questions

Have you been convicted (conviction includes a finding of guilt or the acceptance of a guilty plea, whether or not a conviction recorded) of a **serious offence** or a **tax offence** that you have not previously disclosed to the Bar Council? ☐ Yes\* ☐ No

Have you been convicted (conviction includes a finding of guilt or the acceptance of a guilty plea, whether or not a conviction recorded) of **any offence** (other than an excluded offence) that you have not previously disclosed to the Bar Council? ☐ Yes\* ☐ No

Have you become bankrupt, been served with a notice of a creditor's petition or had happen in relation to you any of the show cause events set out in the *Legal Profession Act 2006* that you have not previously disclosed to the Bar Council? ☐ Yes\* ☐ No

Have you been charged with a **serious offence** that you have not previously disclosed to the Bar Council? ☐ Yes\* ☐ No

 **\*If you have answered YES to any question in Part 3, please attach/upload a written statement detailing the matters including the precise provision under which you have been convicted or charged.**

## PART 4

## FITNESS AND PROPRIETY

Please answer All Questions

Have you done anything likely to adversely affect your good fame and character that you have not previously disclosed to the Bar Council?

☐ Yes\* ☐ No

Are you aware of any facts or circumstances that you have not previously disclosed to the Bar Council which might affect your fitness to remain a legal practitioner, including non compliance with any obligation under the *Income Assessment Act 1936*?

☐ Yes\* ☐ No

 **\*If you have answered YES to any question in Part 3, please attach/upload a written statement detailing the matters.**

If you **do not** provide the information requested we may be unable to process your application to renew your Practising certificate. Also, the information regarding your practice details published on the ACT Bar Association's **Find a Barrister** database on the website may be incomplete.

If you **do not** provide information which is required by law to include on the Register, we may be unable to issue you with a Practising Certificate until that information is provided.

## DECLARATION

I declare that the contents of this application are true and correct.

Applicant's Signature

Date

## CHECKLIST

Please return all of the following to:

**CEO, ACT Bar Association**

GPO Box 789, Canberra City ACT 2601

or Email [ceo@actbar.com.au](mailto:ceo@actbar.com.au)

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- ☐ **Completed Practising Certificate Renewal Form**  
Ensure **All Questions** have been answered and any required written statements have been attached/uploaded.
  - ☐ **Evidence of CPD** - Attached/uploaded copy
  - ☐ Receipt of fee payment for: Practising Certificate, Membership and TPD Insurance  
(if applicable).
  - ☐ **Professional Indemnity Insurance** - Attached/uploaded copy Certificate of Currency
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**If there is a delay in receiving the Certificate of Currency from your insurer, the Practising Certificate Renewal Form and fee payment should still be forwarded to the Association before the due date.**

A Practising Certificate **will not be issued** until proof of insurance has been received by the Association. It is the barrister's responsibility to arrange for this documentation to be provided to the Association.

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## LATE FEE

**Due to COVID-19 no late fees will apply for this renewal period.**

## IMPORTANT

Applications for a Practising Certificate **cannot be processed** until **All** of the above have been received and payment of the appropriate fees cleared.