

### **APPLICATION FOR ISSUE OF A**

## **RESTRICTED PRACTISING CERTIFICATE (RPC)**

### 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 2013

Please tick the box indicating whether you are in category A, B or C.

#### **A:** Application for the **RENEWAL** of an ACT Restricted Practising Certificate

If you currently hold an ACT restricted practising certificate or have held an ACT restricted practising certificate within the last 5 years, and you would like to hold a restricted practising certificate for the year ending 30 June 2013, complete **Parts 1 and 2**.

### **<u>B: Application for a FIRST ACT Restricted Practising Certificate</u>**

If you have not previously held an ACT restricted practising certificate and would like to hold a restricted practising certificate for the year ending 30 June 2013, complete **Parts 1 and 3**.

### **C:** Application for an ACT Restricted Practising Certificate if your previous ACT Restricted Practising Certificate **EXPIRED 5** years ago or longer.

If you held an ACT restricted practising certificate that expired 5 years ago or longer and you would like to hold a restricted practising certificate for the year ending 30 June 2013, complete **Parts 1 and 3**.

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 AF2012- 114 - Application for issue of a restricted practising certificate – (RPC) - Legal Profession Act 2006 section 587(1), for the purposes of section 42(1)(b).

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

PART 1 – ALL APPLICANTS TO COMPLETE									
Title Full name (please print)	Member ID:								
1. I,									
of (residential address):									
Suburb State	Postcode								
Phone No: (BH) (AH) (Mobile)									
Email: (Work)									
Email: (Home)									
Postal address (if differs from residential/office address):									

apply for the issue of **a Restricted Practising Certificate** under the *Legal Profession Act 2006* authorising me to engage in legal practice for the year ending 30 June 2013.

- 2. I am admitted as an Australian lawyer (ss 7 and 41(1)).
- 3. It is a condition of this certificate that I will not practise as a principal (<u>s47</u>).
- 4. 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 (<u>ss 35(3)</u>).
- 5. I practise / will practise as an employee of:

The physical address(es) at which I practise / will practise principally is / are

The postal address (if different) is

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### **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 (<u>ss 44(3) and (4)</u>). <u>Sections 11 and 36</u> 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.
- I understand that subject to <u>s 47(8)(a)(i)</u> it is a condition of this practising certificate that I must complete 10 CPD units **between 1 April 2012 and 31 March 2013** in accordance with the MCPD Guidelines A Continuing Professional Development Scheme for Canberra's Solicitors ("MCPD Guidelines").

### 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)

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### PART 3 – PLEASE COMPLETE IF THIS IS YOUR FIRST ACT RESTRICTED PRACTISING CERTIFICATE OR IF YOUR PREVIOUS ACT RESTRICTED PRACTISING CERTIFICATE EXPIRED FIVE YEARS AGO OR LONGER

			Insert cate	egory	_				
12.	(a)	I currently hold a			practising cert	ificate issued	d by		
Unless issued by ACT Law Society, you								st	
	attach a copy;								
	OR								
	(b) I do not currently hold a practising certificate. I was originally admitted as a								
		of the Supreme C	ourt of			pr	ו 🗌		
		Roll No:		(Please attach a	copy of your	Admission (	Certificate)		
				J					
13.	l pre	eviously held an A	CT pract	tising certificate fro	m	until			
	(Ple	ase complete on	y if you	I have previously	held an ACT p	oractising ce	ertificate).		
14.	Opt	ional: I identify as /	Aborigin	al or Torres Strait	Islander.				
	-		· ·						
	I declare that the information contained in or with this application is true and correct and that I have not omitted any relevant information.								
	una	i i nave not onnite	u ally i						
Appl	icanť	s Signature:				Dated:			