

| Academic qualifications | *mandatory fields |
|--------------------------------------|-------------------|
| <i>List academic qualifications*</i> | |
| | |

| Admission details | *mandatory fields |
|--|---|
| <i>If your name is on the roll of persons admitted to the legal profession as an Australian lawyer in Queensland, please complete the following details.</i> | |
| *Date of admission in Queensland | |
| Basis of admission in Queensland | |
| <input type="checkbox"/> articles of clerkship <input type="checkbox"/> associateship <input type="checkbox"/> supervised traineeship <input type="checkbox"/> legal practice course <input type="checkbox"/> public service | <input type="checkbox"/> solicitor board or bar board examinations <input type="checkbox"/> other (Please specify) _____ _____ |
| <i>If you were admitted in another jurisdiction other than Queensland, please provide details of admission to practise in other jurisdictions other than Queensland.</i> | |
| *State or territory | *Date of admission |
| *Basis of admission in other jurisdiction | |
| <input type="checkbox"/> articles of clerkship <input type="checkbox"/> associateship <input type="checkbox"/> supervised traineeship <input type="checkbox"/> legal practice course <input type="checkbox"/> public service | <input type="checkbox"/> bar examinations <input type="checkbox"/> other (Please specify) _____ _____ |

| National Collection of Ethnic and Cultural Diversity Data | | | | | | | | | | | | | | | | |
|---|---|-------------------------------------|---|---|---|---|--|---|----------------------------------|------------------------------|---------------------------------------|----------------------------------|-----------------------------------|--------------------------------|------------------------------------|---|
| The following three questions are optional and confidential. They are designed to elicit data that is important for the legal profession to understand the background of its members which may then inform diversity and inclusion initiatives. The Queensland Law Society will only share this information with the Law Council of Australia strictly on a de-identified basis. | | | | | | | | | | | | | | | | |
| 1. In which country were you born? | | | | | | | | | | | | | | | | |
| <table style="width: 100%;"> <tr> <td><input type="checkbox"/> Australia</td> <td><input type="checkbox"/> India</td> </tr> <tr> <td><input type="checkbox"/> New Zealand</td> <td><input type="checkbox"/> Canada</td> </tr> <tr> <td><input type="checkbox"/> UK</td> <td><input type="checkbox"/> Sri Lanka</td> </tr> <tr> <td><input type="checkbox"/> Republic of Ireland</td> <td><input type="checkbox"/> Fiji</td> </tr> <tr> <td><input type="checkbox"/> China</td> <td><input type="checkbox"/> USA</td> </tr> <tr> <td><input type="checkbox"/> South Africa</td> <td><input type="checkbox"/> Lebanon</td> </tr> <tr> <td><input type="checkbox"/> Malaysia</td> <td><input type="checkbox"/> Other</td> </tr> <tr> <td><input type="checkbox"/> Hong Kong</td> <td><input type="checkbox"/> I'd rather not say</td> </tr> </table> | <input type="checkbox"/> Australia | <input type="checkbox"/> India | <input type="checkbox"/> New Zealand | <input type="checkbox"/> Canada | <input type="checkbox"/> UK | <input type="checkbox"/> Sri Lanka | <input type="checkbox"/> Republic of Ireland | <input type="checkbox"/> Fiji | <input type="checkbox"/> China | <input type="checkbox"/> USA | <input type="checkbox"/> South Africa | <input type="checkbox"/> Lebanon | <input type="checkbox"/> Malaysia | <input type="checkbox"/> Other | <input type="checkbox"/> Hong Kong | <input type="checkbox"/> I'd rather not say |
| <input type="checkbox"/> Australia | <input type="checkbox"/> India | | | | | | | | | | | | | | | |
| <input type="checkbox"/> New Zealand | <input type="checkbox"/> Canada | | | | | | | | | | | | | | | |
| <input type="checkbox"/> UK | <input type="checkbox"/> Sri Lanka | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Republic of Ireland | <input type="checkbox"/> Fiji | | | | | | | | | | | | | | | |
| <input type="checkbox"/> China | <input type="checkbox"/> USA | | | | | | | | | | | | | | | |
| <input type="checkbox"/> South Africa | <input type="checkbox"/> Lebanon | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Malaysia | <input type="checkbox"/> Other | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Hong Kong | <input type="checkbox"/> I'd rather not say | | | | | | | | | | | | | | | |
| 2. What is your ancestry? Provide up to two ancestries only. Examples of 'Other' include Vietnamese, Lebanese. | | | | | | | | | | | | | | | | |
| <table style="width: 100%;"> <tr> <td><input type="checkbox"/> Australian</td> <td><input type="checkbox"/> Aboriginal</td> </tr> <tr> <td><input type="checkbox"/> English</td> <td><input type="checkbox"/> Torres Strait Islander</td> </tr> <tr> <td><input type="checkbox"/> Irish</td> <td><input type="checkbox"/> I'd rather not say</td> </tr> <tr> <td><input type="checkbox"/> Scottish</td> <td><input type="checkbox"/> Other(s) _____</td> </tr> <tr> <td><input type="checkbox"/> Italian</td> <td>_____</td> </tr> <tr> <td><input type="checkbox"/> Greek</td> <td>_____</td> </tr> <tr> <td><input type="checkbox"/> Indian</td> <td>_____</td> </tr> <tr> <td><input type="checkbox"/> Chinese</td> <td>_____</td> </tr> </table> | <input type="checkbox"/> Australian | <input type="checkbox"/> Aboriginal | <input type="checkbox"/> English | <input type="checkbox"/> Torres Strait Islander | <input type="checkbox"/> Irish | <input type="checkbox"/> I'd rather not say | <input type="checkbox"/> Scottish | <input type="checkbox"/> Other(s) _____ | <input type="checkbox"/> Italian | _____ | <input type="checkbox"/> Greek | _____ | <input type="checkbox"/> Indian | _____ | <input type="checkbox"/> Chinese | _____ |
| <input type="checkbox"/> Australian | <input type="checkbox"/> Aboriginal | | | | | | | | | | | | | | | |
| <input type="checkbox"/> English | <input type="checkbox"/> Torres Strait Islander | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Irish | <input type="checkbox"/> I'd rather not say | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Scottish | <input type="checkbox"/> Other(s) _____ | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Italian | _____ | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Greek | _____ | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Indian | _____ | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Chinese | _____ | | | | | | | | | | | | | | | |
| 3. Are you of Aboriginal or Torres Strait Islander origin? | | | | | | | | | | | | | | | | |
| <table style="width: 100%;"> <tr> <td><input type="checkbox"/> Yes – Aboriginal</td> <td><input type="checkbox"/> No</td> </tr> <tr> <td><input type="checkbox"/> Yes – Torres Strait Islander</td> <td><input type="checkbox"/> I'd rather not say</td> </tr> <tr> <td><input type="checkbox"/> Yes – both Aboriginal and Torres Strait Islander</td> <td></td> </tr> </table> | <input type="checkbox"/> Yes – Aboriginal | <input type="checkbox"/> No | <input type="checkbox"/> Yes – Torres Strait Islander | <input type="checkbox"/> I'd rather not say | <input type="checkbox"/> Yes – both Aboriginal and Torres Strait Islander | | | | | | | | | | | |
| <input type="checkbox"/> Yes – Aboriginal | <input type="checkbox"/> No | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Yes – Torres Strait Islander | <input type="checkbox"/> I'd rather not say | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Yes – both Aboriginal and Torres Strait Islander | | | | | | | | | | | | | | | | |

Electronic Transactions Act

In accordance with the *Electronic Transactions (Queensland) Act 2001*, the Society may provide notices, such as practising certificate renewals, to you by electronic communication. By completing this application, your consent to this form of contact is taken to be given.

Declaration and disclosure requirements

**mandatory fields*

*Have you been subject to any of the suitability matters mentioned in ss9 and 46 of the *Legal Profession Act 2007* which may affect your fitness to hold a practising certificate?

Yes No

If **'Yes'**, provide details

(If you have previously disclosed any such matter to the Society, you need only provide the date of the correspondence in which you did so.)

*Have you been subject to any 'show cause event' as defined in Schedule 2 of the *Legal Profession Act 2007* which may affect your suitability to hold a practising certificate?

Yes No

If **'Yes'**, have you provided a notice and statement as required by ss67 or 68(1) of the *Legal Profession Act 2007* to the Society?

Yes No

If **'Yes'**, provide the date of the notice and statement

If **'No'**, provide a notice and statement *(attach to this form)*

*Have you been disqualified from managing corporations under any law in place in Australia, including the *Corporations Act 2001* (Cth)?

Yes No

If **'Yes'**, provide details

In accordance with r18A, Queensland Law Society Administration Rule 2005, it is the responsibility of each solicitor to provide any change of their details to Queensland Law Society in writing (GPO Box 1785 Brisbane Qld 4001 or facsimile number 07 3842 5999 or email records@qls.com.au) or you may amend the detail in your profile on our website

I solemnly and sincerely declare that the information and particulars set forth in this form are complete and accurate in every detail.

Signed

Date

Privacy statement

Collection notice

The Queensland Law Society Incorporated (we, us, our) collects your personal information on this form to assess your application for the grant of a practising certificate. If you do not provide full details in the mandatory fields, your application cannot be assessed. We may verify the information you have provided, for example, by contacting corresponding authorities in other states or territories.

We may receive your personal information from third parties, for example a corresponding authority, the Legal Services Commission or a member of the public through a complaint or claim on the fidelity guarantee fund.

Relevant legislation

We are authorised to collect your personal information under the *Legal Profession Act 2007* ('the Act'), *Legal Profession Regulation 2017* ('the Regulation'), *Legal Profession (Society) Rules 2007*, *Queensland Law Society Indemnity Rule 2005* and the *Queensland Law Society Administration Rule 2005*. Our use and disclosure of your personal information is governed by the Act, the *Information Privacy Act 2009* (Qld) and the *Privacy Act 1988* (Cth).

What do we do with the information you provide?

Information will be recorded in our database and used by us to carry out our functions under the Act, the Regulation and rules made under the Act. We use and disclose your personal information as detailed below and as authorised or required by law.

If you declare that you have been subject to a suitability matter, a show cause event or disqualified from managing corporations, the information you provide will be used to decide whether to grant your certificate under s 51 of the Act.

The information you provide may be used in disciplinary action against you, including referral to the Legal Services Commission, if any of the information is false, inaccurate, misleading or otherwise warrants such action being taken.

If your application for a practising certificate is successful, the information you provide will be used to contact you regarding:

- your practising certificate (including renewal)
- your law practice (if you are a principal)
- your obligations under the Act and statutory instruments made under the Act
- membership and services offered by the Society including events and professional development
- our research, relevant to the profession.

If you become a member of the Society, the information you provide will be used by the Society to administer membership services and to contact you about your membership and products, services and events we offer to members, including the **Limitation of Liability Scheme**, CPD, QLS update and Proctor. If requested by Member Benefits Australia, we may verify that you are a member of the Society.

Who do we disclose information to?

We disclose the type of information collected on this form to:

- the public, for example through the '**Register of Solicitors**' function on our website, pursuant to s 81 and s 210 of the Act
- Law Council of Australia
- Lexon Insurance Pte Ltd, our wholly owned subsidiary
- the Legal Services Commission pursuant to the information sharing agreement made pursuant to s 704 of the Act
- corresponding authorities under arrangements made pursuant to s 481 of the Act
- your employer (if applicable) for advice about whether your employer will be paying for your practising certificate and other associated fees
- Westpac Banking Corporation (Westpac), if you or your employer has arranged Westpac to pay for your practising certificate and other related fees
- third parties we use to distribute communication to you.

The Society sends aggregate and anonymous data to the Law Council of Australia to identify the number of Indigenous practitioners in Queensland for research purposes. Aggregated and de-identified data may be used, disclosed and published by the Society.

We may send your personal information to service providers or third parties who store data or operate outside Australia. If we do this, we make sure there are arrangements in place to protect your information.

Privacy policy

Our privacy policy contains information about how you may access and apply to amend your personal information as well as how to complain about a breach of your privacy. View our **Privacy Policy** for full details.

Payment form for grant of a practising certificate



This is not part of the QLS FORM 1 (LPA)

| Fees | | | |
|------------------------------------|-----------|-----------|---------------------|
| This application is accompanied by | | | |
| | Fee | GST | Total (include GST) |
| Practising certificate fee | \$ | \$ | \$ |
| Fidelity fund contribution | \$ | \$ | \$ |
| TOTAL | \$ | \$ | \$ |

| Payment of fees | |
|--|--|
| Total payment \$ | |
| <input type="checkbox"/> Credit card (Diners Club is not accepted) | |
| <input type="checkbox"/> Visa | <input type="checkbox"/> Mastercard <input type="checkbox"/> Amex |
| Card number | <input type="text"/> |
| Cardholder name | |
| Expiry date | / Amount \$ |
| Cardholder signature | |
| <input type="checkbox"/> Cheque (made payable to Queensland Law Society Inc and attached to this form) | |

Enquiries and completed payment details (if applicable) –