

Application for grant of a practising certificate

Queensland | *Legal Profession Act 2007* | section 50

QLS FORM 1 (LPA) | version 18

Applications for practising certificates in Queensland are made in accordance with ss24 and 50 of the *Legal Profession Act 2007* which, in general, requires all practitioners other than those fully employed as a government legal officer, to hold current practising certificates.

Applicant details	*mandatory fields
*Full name (BLOCK LETTERS)	
*First name	
*Middle name/s	
*Surname	
I wish to apply for a practising certificate for the year ending 30 June 20 _____ (Year)	

Personal details	*mandatory fields
*Title (<i>Mr, Mrs, Miss, Ms, Mx, Other – please specify</i>)	
*Date of birth	
Are you an Australian Aboriginal person and/or Torres Strait Islander? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Gender <input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> Not specified	
*Residential address	
	Postcode
Private telephone number	(Include area code)
Mobile telephone number	
Private email address	

Employment details	*mandatory fields
<i>If associated with more than one law practice or employer, please append additional details. Please complete the following details about your law practice or employer.</i>	
*Law practice/employer	
*Street address	
	Postcode
*Postal address	
	Postcode
*Document exchange address	
	Postcode
*Telephone number	(Include area code)
*Facsimile number	(Include area code)
*Email address	
*Employment status	
<input type="checkbox"/> law practice	<input type="checkbox"/> government
<input type="checkbox"/> partner	<input type="checkbox"/> government department
<input type="checkbox"/> sole practitioner	<input type="checkbox"/> government agency
<input type="checkbox"/> legal practitioner director	<input type="checkbox"/> judicial
<input type="checkbox"/> employee	<input type="checkbox"/> locum tenens
<input type="checkbox"/> consultant	<input type="checkbox"/> teaching institution
<input type="checkbox"/> community legal centre	<input type="checkbox"/> retired
<input type="checkbox"/> limited principal	<input type="checkbox"/> MDP legal practitioner partner
<input type="checkbox"/> employee	<input type="checkbox"/> unemployed
<input type="checkbox"/> volunteer	<input type="checkbox"/> other (<i>Please specify</i>)
<input type="checkbox"/> corporation (<i>including local government</i>)	_____

*Date of commencement in above status	

Enquiries and completed payment details (if applicable) –

Records and Member Services, Queensland Law Society, GPO Box 1785, Brisbane Qld 4001
p 1300 367 757 | f 07 3842 5999 | records@qls.com.au | For more information visit qls.com.au | ABN 33 423 389 441

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										
<table border="0"> <tr> <td><input type="checkbox"/> articles of clerkship</td> <td><input type="checkbox"/> solicitor board or bar board examinations</td> </tr> <tr> <td><input type="checkbox"/> associateship</td> <td><input type="checkbox"/> other <i>(Please specify)</i></td> </tr> <tr> <td><input type="checkbox"/> supervised traineeship</td> <td>_____</td> </tr> <tr> <td><input type="checkbox"/> legal practice course</td> <td>_____</td> </tr> <tr> <td><input type="checkbox"/> public service</td> <td>_____</td> </tr> </table>	<input type="checkbox"/> articles of clerkship	<input type="checkbox"/> solicitor board or bar board examinations	<input type="checkbox"/> associateship	<input type="checkbox"/> other <i>(Please specify)</i>	<input type="checkbox"/> supervised traineeship	_____	<input type="checkbox"/> legal practice course	_____	<input type="checkbox"/> public service	_____
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<input type="checkbox"/> supervised traineeship	_____									
<input type="checkbox"/> legal practice course	_____									
<input type="checkbox"/> public service	_____									
<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										
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<input type="checkbox"/> public service	_____									

Electronic Transactions Act
In accordance with the <i>Electronic Transactions (Queensland) Act 2001</i> , 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
<p>*Have you been subject to any of the suitability matters mentioned in ss9 and 46 of the <i>Legal Profession Act 2007</i> which may affect your fitness to hold a practising certificate?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If 'Yes', provide details <i>(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.)</i></p>
<p>*Have you been subject to any 'show cause event' as defined in Schedule 2 of the <i>Legal Profession Act 2007</i> which may affect your suitability to hold a practising certificate?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If 'Yes', have you provided a notice and statement as required by ss67 or 68(1) of the <i>Legal Profession Act 2007</i> to the Society?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If 'Yes', provide the date of the notice and statement</p> <p>If 'No', provide a notice and statement <i>(attach to this form)</i></p>
<p>*Have you been disqualified from managing corporations under any law in place in Australia, including the <i>Corporations Act 2001</i> (Cth)?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If 'Yes', provide details</p>
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 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 grant of your 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 used by us to update our database and 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 or a show cause event, or disqualified from managing corporations, the information you provide will be used to decide whether to grant you a certificate under s51(1)(a) or s69 of the Act and/or whether to grant or renew your membership.

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 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 are or 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 Professional Standards (Limitation of Liability) Scheme, Specialist Accreditation, CPD, *QLS update* and *Proctor*. If requested by Member Benefits Australia, we may verify that you are a member of the Society. We will also disclose your employment details to the Law Council of Australia, so that they can send you correspondence.

Who do we disclose information to?

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

- the CPD Committee and/or the Specialist Accreditation Board (if applicable), if you declare you have not met the minimum CPD requirements (see [CPD Guide](#) and [Specialist Accreditation Scheme Candidate Handbook](#) on our website for further information)
- the public, for example through the '[Register of Solicitors](#)' function on our website, pursuant to s81 and s210 of the Act
- Lexon Insurance Pte Ltd, our wholly owned subsidiary
- the Legal Services Commission pursuant to the information sharing agreement made pursuant to s704 of the Act
- corresponding authorities under arrangements made pursuant to s481 of the Act
- your employer (if applicable) for advice about whether your employer will be paying for the renewal of 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 or provide services to you.

The Society sends aggregated and de-identified data to the Law Council of Australia for research purposes. Aggregated and de-identified data may also be used, disclosed or published by the Society, for example, the number of pro-bono hours the profession completes.

We may send your personal information to service providers or third parties who store data or operate outside Australia.

If you do not wish your details to be used for one of more of these purposes, you should advise the Records section of the Society, GPO Box 1785, Brisbane Qld 4001 in writing. The Society will accommodate your request provided that the disclosure is not required by law.

Privacy policy

Our privacy policy contains information about how you may access and seek correction to your personal information, the countries which the Society may disclose 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"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <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) –