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| **Section 1: Personal Information** | |
| **Last Name:** | **Click here to enter text.** |
| **First Name & Middle Name(s):** | **Click here to enter text.** |
| Level Applied for: | Level 1 |
| **Bar Number - 5 digits (if applicable):** | **Click here to enter text.** |
| **SRA Number - 6 digits (if applicable):** | **Click here to enter text.** |
| **Pupillage** | **My second six commences: Click here to enter a date.** |

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| **Section 2: Current Chambers or Solicitors Firm** | |
| **Name of Chambers/Solicitors Firm:** | **Click here to enter text.** |
| **Work Address:** | **Click here to enter text.** |
| Correspondence Address:*(if different from above)* | **Click here to enter text.** |
| E-mail Address: | **Click here to enter text.** |
| **CJSM E-mail Address**: | **Click here to enter text.** |

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| **Section 3: Preferred Circuit(s) & Crown Court Location** |

**You may apply to be listed on a maximum of two Circuits. Select your primary [first choice] Circuit, where you intend to practice predominantly, and optionally your secondary [second choice] Circuit.**

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| **First choice Circuit:** | **Choose an item.** |
| **Second choice Circuit (optional):** | **Choose an item.** |
| **State up to three preferred Crown Court locations, geographically sited within your selected Circuit(s) above:** | **Click here to enter text.** |

**If applying for the *Wales and Chester* Circuit, please state if you can speak Welsh and conduct proceedings in Welsh:**

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|  | Yes | No |
| **Welsh Speaker?** |  |  |
| **Conduct proceedings in Welsh?** |  |  |

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| **Section 4: Pre-Qualification Questionnaire** | | |
|  | Yes | No |
| **1. Have you ever been the subject of a criminal investigation by the police, Serious Fraud Office or any other prosecuting authority in the United Kingdom or abroad?** |  |  |
| **2. Have you ever been charged with and/or prosecuted for a criminal offence in the United Kingdom or abroad?** |  |  |
| **3. Have you ever been convicted, cautioned, reprimanded or been subject to any out of Court disposals for a criminal offence in the United Kingdom or abroad, or by any court martial?** |  |  |
| **4. Have you ever been the subject of disciplinary proceedings or enquiry by your professional or other body?** |  |  |
| **5. Have you been the subject of civil proceedings for negligence or breach of trust?** |  |  |
| **6. Has the CPS or Revenue and Customs Prosecutions Office ever had occasion to remove instructions from you?** |  |  |

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| **If the answer to any of the questions above is yes, please provide full details and dates here:** | **Click here to enter text.** |

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| **Section 5: Professional Qualifications** | |
| **Year of Call or Admission:** | **Click here to enter text.** |
| **Dates of Bar/Legal Practice Course examinations:** | **Click here to enter text.** |
| **Grades of Bar/Legal Practice Course examinations:** | **Click here to enter text.** |

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| **Section 6: Degree & Post-Graduate Qualifications** | | | |
| **Date of Completion:** | **Institution:** | **Course/Subject:** | **Results (inc. Grades):** |
| **Click here to enter text.** | **Click here to enter text.** | **Click here to enter text.** | **Click here to enter text.** |
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| **Section 7: Examples of your Work** |

***All information you provide in this section will be treated in confidence. Please ensure that sensitive information is anonymised.***

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| **Section 7a: Advocacy** |

**Please provide examples of your advocacy experience to date. This should include court work (wherever possible), pro bono work, mooting, debating or public speaking. Please refer to the Selection Criteria document (specific to your level).**

***Maximum of 300 words*.**

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| **Click here to enter text.** |

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| **Section 7b: Advisory** |

**Please provide details of a question or problem you have had to advise on, what you advised and why. Please refer to the Selection Criteria document (specific to your level).**

***Maximum of 300 words*.**

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| **Click here to enter text.** |

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| **Section 7c: Other Relevant Knowledge, Skills & Experience** |

**Use this section to outline, for example:**

**• Knowledge and skills obtained from employment prior to becoming a barrister or solicitor**

**• Training courses attended**

**• How you keep up to date with changes in the law**

**• Any specialist knowledge or expertise which you feel may be useful**

**Maximum of 300 words.**

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| **Click here to enter text.** |

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| **Section 7d: Appreciation of the Role of a Panel Advocate** |

**Please explain why you want to be on the CPS Advocate Panel, what you understand the role of a Panel advocate to be, and what qualities you possess which would make you a good prosecution advocate.**

***Maximum of 300 words*.**

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| **Click here to enter text.** |

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| **Section 7e: Additional Information** |

**Please use the space below to mention anything else in support of your application.**

**Maximum of 300 words.**

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| **Click here to enter text.** |

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| **Section 8: Referee** | |
| **Name:** | **Click here to enter text.** |
| **Job Title/Position:** | **Click here to enter text.** |
| **Address:** | **Click here to enter text.** |
| **Town/City:** | **Click here to enter text.** |
| **Postcode:** | **Click here to enter text.** |
| **E-mail Address:** | **Click here to enter text.** |
| **Telephone No:** | **Click here to enter text.** |

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| **Section 9: Application Checklist** |

**I have completed the Equality Monitoring Questionnaire and submitted to the Advocate Panel mailbox**

**Reference Form attached**

**Or**

**Reference Form to be sent under separate cover**

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| **Section 10: Declaration** |

***I declare that the information contained in this form is true and complete. The drafting and examples provided are my own. If any statement is found to be false or misleading, or if I have withheld relevant information, or copied the work of others, then my application may be disqualified or I may be removed from the Panel.***

***I confirm that I have read, and will work in accordance with, the*** [***Advocate Panel Members’ Commitment***](https://www.cps.gov.uk/advocate-panels/advocate-panels-2020-panel-general-crime-and-rape-list)***.***

***(Please tick the box to accept)***

|  |  |
| --- | --- |
| **Name:** | **Click here to enter text.** |
| **Date** | **Click here to enter text.** |