



**THE CHIEF REGISTRAR
HIGH COURT OF FIJI
P.O.BOX 2215 GOVERNMENT BUILDINGS
SUVA**

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APPLICATION FOR PRACTISING CERTIFICATE

(Legal Practitioners Decree 2009)

To cover the period: 1st March 2012 – 28th February 2013

[Please provide the information requested and answer the following questions]

PERSONAL & PROFESSIONAL INFORMATION

A. Surname of Legal Practitioner _____

B. Forenames _____

C. Date of Birth _____

D. Are you a Fiji citizen? Yes No

E. If 'No', do you possess a work permit? _____ [Please attach work permit with this application]

F. Do you hold dual citizenship? _____ If yes, list passports held below.

[Passports Held]

[Residential Address in that Country]

Country: _____ No: _____

Country: _____ No: _____

Country: _____ No: _____

G. EDP No. _____ [If employed by Fiji Government]

H. Marital Status: Single Married Divorced Separated

I. Next of Kin [Name, address, telephone, email, etc] _____

J. Relationship to you _____

K. Emergency contact [Name, address, telephone, email, etc] _____

L. (i) Residential address _____ (ii) Postal address for service of all notices/correspondence _____

(iii) Practice address [for courier delivery]

M. Phone Contact: **(Business)** _____ **(Home)** _____ **(Mobile)** _____

N. Fax No _____

O. Email address _____

ADMISSION, PRACTISING CERTIFICATE FEES, & CLE

P. (i) Date of Admission in Fiji: _____ [Attach certified copy of Enrolment/Admission certificate]

(ii) Are you admitted in any other jurisdiction(s) _____

(iii) If so, state where and attach certificate of enrolment/admission] _____

(iv) Also attach certificate of good standing from the professional body governing your practice as a barrister & solicitor overseas.

Q. Please specify the category of fees payable in your estimation for 2011: _____ See Schedule No. 1 [Fees] attached to this application form.

R. CLE points accumulated for renewal 2011: _____ [Unless separately and previously forwarded to the Chief Registrar please attach evidence of attendance at courses, lectures, conferences, etc. which have been approved by the Board of Legal Education and also attach approval of the Board of Legal Education.]

EMPLOYMENT OR PRACTICE INFORMATION

S. (i) Please give full name and complete details of your employer, firm or practice.

Name _____ Phone: _____ / _____

Address _____ Fax: _____ / _____

_____ Email: _____

(ii) Date of commencement of work at current or intended law firm/ practice _____

(iii) Previous law firm/ employer _____

(iv) Please attach your business card & letterhead.

T. City Agent for (i) Suva _____

(ii) Lautoka _____

(iii) Labasa _____

U. Do you have a Branch Office?

Yes No

(i) If Yes, specify [Address] _____

[Phone]: _____ [Fax No]: _____

(ii) Who is supervising, controlling or attending such Branch Office? _____

(iii) Residential Address of supervising practitioner _____

TRUST ACCOUNT INFORMATION

V. Trust Account Held - Details

a.) Law Firm: _____

b.) Name of Auditor(s): _____

(1) Name of Account Holder: _____ (2) Name of Account Holder: _____

Bank: _____ Bank: _____

Account No: _____ Account No: _____

Signatories: _____ Signatories: _____

Currency of account: _____ Currency of account: _____

(3) Name of Account Holder: _____ (4) Name of Account Holder: _____

Bank: _____ Bank: _____

Account No: _____ Account No: _____

Signatories: _____ Signatories: _____

Currency of account: _____ Currency of account: _____

(5) Name of Account Holder: _____

Bank: _____

Account No: _____

Signatories: _____

Currency of account: _____

STATEMENTS ON PERSONAL CHARACTER

W. Have you ever:

[please tick appropriate box]

(i) been convicted of a crime or offence (including a conviction which is now removed from official record) before or since the date of your admission in Fiji or elsewhere?

No

Yes

- | | | | | |
|---|----|--------------------------|-----|--------------------------|
| (ii) been charged with any offence that is currently awaiting legal action? | No | <input type="checkbox"/> | Yes | <input type="checkbox"/> |
| (iii) been refused admission or struck off the roll of barristers and or/solicitors and/ or legal practitioners in Fiji or elsewhere? | No | <input type="checkbox"/> | Yes | <input type="checkbox"/> |
| (iv) been refused a practising certificate, had it suspended or cancelled in Fiji or elsewhere? | No | <input type="checkbox"/> | Yes | <input type="checkbox"/> |
| (v) been found guilty of professional misconduct in Fiji or elsewhere? | No | <input type="checkbox"/> | Yes | <input type="checkbox"/> |
| (vi) been found guilty of unsatisfactory professional conduct in Fiji or elsewhere? | No | <input type="checkbox"/> | Yes | <input type="checkbox"/> |

If your answer is YES to any of the above questions, please provide all relevant details on a separate sheet.

- X.** Do you have any Complaints against you or your firm pending before the Chief Registrar? If so please provide the names or reference number for each complaint.

HEALTH & FITNESS TO PRACTICE LAW

- Y.** (i) Have you a medical condition [mental or physical] which might affect your ability to give full or sufficient attention to your work as a practitioner or which might lead to being absent from work? _____

[If so, please provide details of your condition and attach relevant medical report(s).]

- (ii) Have you any addictive, psychiatric or behavioral conditions to be revealed? _____

[If so, please provide details of your condition and attach relevant medical report(s).]

- Z.** (i) Have you ever been adjudicated bankrupt in any jurisdiction? _____

[If so, please provide details]

- (ii) Do you remain an undischarged bankrupt? _____

[If so, please provide details.]

- (iii) Have you ever had a receiving order made against you or consented to orders against you in bankruptcy proceedings or committed an act of bankruptcy? If so, give details. _____

Applicant's Signature

Date

STATUTORY DECLARATION [Cap 43 s. 3]

I, _____ of _____ Legal Practitioner, hereby solemnly and sincerely declare that the information and particulars provided in support of this Application for a Practising Certificate are true and correct.

AND I make this solemn declaration believing the same to be true and by virtue of the Statutory Declarations Act.

Declared at _____ this ____ day of _____, 2012 before me

Commissioner for Oaths
[Please print name and affix stamp of Commissioner]



[Declarant]

ATTACHMENTS

I hereby attach to this application the following documents:

- a) Current work permit
- b) Certificate of enrolment/admission for Fiji [certified]
- c) Certificate of enrolment/admission for overseas enrolments/admission [certified]
- d) Certificates of attendance at approved courses, lectures, conference [for CLE purposes]
- e) Evidence of approval by Board of Legal Education for such attendance in (c) above unless previously forwarded to the Chief Registrar
- f) Recent passport size photograph of Applicant [signed at back and dated]
- g) Business card
- h) Letterhead
- i) Practising certificate for the periods ending 2010 and 2011
- j) Other papers [please list]

Schedule No. 1 - Fees

	Category	Fee (\$)
A	Practitioner with not more than 3 years practicing experience [excluding practitioners employed by Government Departments or statutory authorities]	300
B	Practitioner currently unemployed	300
C	Practitioner employed by Government departments or statutory authority irrespective of years of experience post admission	350
D	Private Practitioners with not less than 3 years but not more than 5 years practicing experience	350
E	Private Practitioner with more than 5 years of practicing experience	400
F	Sole Practitioner in practice for not more than 3 years since commencement of practice	400
G	Sole Practitioner or consultant practitioner in practice for not less than 3 years but not more than 5 years since commencement of practice	450
H	Sole Practitioner or consultant practitioner in practice for more than 5 years since commencement of practice	500
I	Practitioners employed by a private or publicly listed limited liability company or corporate body or bank (local or foreign based) or non- governmental organization, (local, regional, international)	450
J	Equity partner in a private firm	600

NB: Practitioners applying mid-year will be charged fees for the Practising Certificate on a *pro rata basis*.

Notes

1. If there is any material non disclosure or misrepresentation in this form it may result in the revocation of the Practising Certificate.
2. Where applicants have previously submitted attachments providing confirmatory evidence eg. admission in Fiji or overseas, they need not submit the same documentary evidence at each renewal application for a practising certificate.
3. Applicants must use their legal names as reflected in their certificate of enrolment when filling the application form.
4. All applicants are to submit to the Chief Registrar's Office a recent passport size photo, a business card, letterhead of the firm/office they are currently employed in and copies of their practicing certificates for the periods ending in February 2010 and 2011. The passport photo must be signed at the back and dated by the Applicant.
5. New admittees must also attach a certified copy of their Admission Certificate.
6. All Legal Practitioners need to gain ten (10) Continuing Legal education (CLE) points for the renewal of their practising certificates every year or to obtain exemption individually from the Chief Registrar.
7. Practitioners who have held a practising certificate for more than 6 months prior to making this application must produce evidence of having satisfied the mandatory Continuing Legal Education requirements of 10 hours, in accordance with the Legal Practitioner Decree 2009.
8. Holders of work permits must attach a copy of their permit to this application.
9. All trustees of the trust accounts of a practice must ensure that their Trust Account auditor's report and Trustee(s) Report are submitted to the Chief Registrar prior to the end of November every year.
10. If your details change during the year, you should write in and inform the office of the Chief Registrar of such changes.
11. Fees must be paid at the time of submitting the application, and any increase, within 10 days of notification of the increased fee.

FOR OFFICIAL USE ONLY

HIGH COURT RECEIPT NO _____ DATE ____/____/____ AMOUNT \$ _____
AUTHORISED OFFICER _____