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| **APPLICATION DETAILS FOR INDEPENDENT PRACTITIONERS** | | | | |
| **Name:** |  | | | |
| **Address:** |  | | | |
| **Contact details:** |  | | | |
| Telephone: |  | | | |
| General email address: |  | | | |
| Secure email address (e.g., cjsm) |  | | | |
| Are you an Independent Practitioner? *Please tick* | Yes |  | No |  |
| If not currently with Chambers, do you have 3 years’ PQE? *Please tick* | Yes |  | No |  |
| **Please note, we cannot accept applications from Independent Practitioners with less than 3 years’ PQE.** | | | | |
| Do you hold a current practising certificate? *Please tick* | Yes |  | No |  |
| Do you currently hold Indemnity Insurance (the minimum sum insured being £500,000). *Please tick* | Yes |  | No |  |
| If “No” are you prepared to obtain Indemnity Insurance should an opportunity arise at the SFO? *Please tick* | Yes |  | No |  |

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| **Essential Experience**  **Independent Practitioners should respond only to questions for areas that they wish to be considered for.**  ***(Maximum of 400 words per section).*** | |
| In relation to your main practice areas:  Please provide specific examples of work/cases you have undertaken in relation to work undertaken by the SFO. (Fraud, Bribery & Corruption and/or Proceeds of Crime).  **Please note, not all specialisms need to be covered.** |  |
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| Please state the complexity and duration of your instructions. |  |
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| **Disclosure** | |
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| Please provide a minimum of two examples of previous disclosure review work you have undertaken. |  |
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| If you are unable to provide two specific examples relating to disclosure review work, please provide examples of other areas of work that you feel are relevant. |  |
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| **LPP – for LPP Review only** | |
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| For LPP reviewers, knowledge and experience of the law relating to LPP is essential.  If applying for LPP review work, please provide a minimum of two examples of previous LPP work you have undertaken. (Please note: If you are unable to provide at least two such examples, we are unlikely to select you for this area of work.) |  |
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| **Desirable experience for Independent Practitioners** | |
| **PII – Public Interest Immunity** |  |
|  |  |
| Experience in this area is desirable but not essential. Please provide any relevant examples of this type of work here. |  |
|  |  |
| **Proceeds of Crime** |  |
|  |  |
| Experience in this area is desirable but not essential. Please provide any relevant examples of this type of work here. |  |
|  | |
| **References for Independent Practitioners only.**    **Please provide details of two professional referees below and forward the Referee form for their completion. References should be returned to the SFO by 13 July 2016 by email to:** [**panelcounsel@sfo.gsi.gov.uk**](mailto:panelcounsel@sfo.gsi.gov.uk) | |
| **1.** |  |
| **2.** |  |

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| **If successfully instructed to an SFO case, you will be asked to agree to the SFO’s policies regarding the security of communications and information, details of which will be given on commencement of your instruction.** |
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| **All Counsel appointed to SFO cases will be required to sign the Official Secrets Act and follow the SFO’s security policies.** |

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| **Declaration** | |
| **I declare that all the information I have given on this form, is, to the best of my knowledge**  **and belief, true and complete.**  **I understand that if it is subsequently discovered that any statement is false or misleading, or that relevant information has been withheld, my application may be disqualified for that reason.** | |
| Signature: | Date: |

\*Please note: a handwritten signature is not required as the forms should be submitted electronically.