**Paralegal Practising Certificate Application Form**

**For Applicants taking the Experiential Route PPCA2**

If you do not have the requisite qualifications as identified by the PPR Tiers, then you should use this form to apply for a Paralegal Practising Certificate.

Please read the Guidance Notes.

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| **SECTION 1. MEMBERSHIP** |

**Recognised Body** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Membership No.** \_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **SECTION 2. APPLICANT DETAILS** |  |

**First Name** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Last Name** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Telephone** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Mobile** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Main Email** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Secondary Email** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Gender** Male  Female  **Date of Birth** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Current Address** (you must have lived her for a minimum of 5 years. If not, please provide details of former address(s) and dates).

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**Country** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Post Code** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Former Address:**

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**Country** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Post Code** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **SECTION 3. COMPLAINTS** |

Do you subscribe to your Recognised Body’s Complaints procedure? Yes/No

If NO, please provide a copy of your complaints procedure.

Have you had any complaints during the last two years? Yes/No

If yes, please provide details.

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| **SECTION 4. QUALIFICATIONS, TRAINING & INSURANCE** |

**What Tier Level are you on the PPR?**

**What area (s) of law will you be practising?**

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**Please list all of the services you will be offering:**

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**Are you applying for a General or Specified Practising Certificate?**

General (More than one area of law for Tier 3 and above)

Specified (One area of law only)

Please list the evidence of your experience that will accompany this application. You need to provide evidence of competence for **all** of the services you wish to offer.

Please include copies of evidence that you wish to rely on including any relevant dates, e.g. Client Testimonials; Employer Testimonials; Details of training undertaken; Qualification certificates (if any); Tribunal decisions (if relevant), etc.

Evidence may be provided in the form of a portfolio of work undertaken. Failure to provide sufficient evidence for each service you intend to supply will result in a delayed application process.

Applicants applying via the experiential route will be required to undertake a telephone interview. You will be contacted to arrange this once your application has been assessed.

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Please provide the details of your Professional Indemnity Insurance which must provide at least £1million cover to include loss of documents cover.

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| **SECTION 5. SUITABILITY TEST** |

The PPR has a responsibility under the PPR Code of Conduct made pursuant to the principles contained in the Legal Services Act 2007, and pursuant to the PPR Practising Certificate Rules and the PPR Practitioners Rules to ensure that there are no issues which could call into question your character and suitability as a paralegal.

**ALL APPLICANTS MUST ANSWER THE FOLLOWING QUESTIONS.**

**All material information relating to your application must be disclosed. Failure to disclose material information will be treated as prima facie evidence of dishonest behaviour. You must disclose any matters that have occurred in the UK and/or overseas.**

**I have read and understood this statement (Signature) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

1) Have you ever entered into an individual Voluntary Arrangement under the Insolvency Act 1986 as amended? Yes/No

2) Have you ever entered into a partnership Voluntary Arrangement under the Insolvency Act 1986 as amended? Yes/No

3) Have you ever been an un-discharged or discharged bankrupt? Yes/No

4) Have you been a Director of a company or member of an LLP which has been wound up or the subject of an administration order administrative receivership or a voluntary arrangement under the Insolvency Act 1986? Yes/No

5) Have you ever been disqualified from being a company director? Yes/No

6) Have you been committed to prison in civil or criminal proceedings or been convicted of an indictable offence (subject to the Rehabilitation of Offenders Act)? Yes/No

7) Do you lack capacity within the meaning of the Mental Capacity Act 2005?

Yes/No

8) Have you been removed from the office of charity trustee by an order within the terms of section 72(1) (d) of the Charities Act 1993? Yes/No

9) Have you been the subject of a money judgement which has been outstanding for more than 28 days? Yes/No

10) Is there any other matter that might reasonably be expected to be disclosed as affecting your fitness to act as a Paralegal? Yes/No

**If the answer is YES to any of the above then the PPR may either refuse the application for a Paralegal Practising Certificate or impose a condition upon the Paralegal Practising Certificate.**

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| **SECTION 6. DECLARATION BY RECOGNISED BODY** |

The PPR will seek confirmation of your suitability to be awarded a Paralegal Practising Certificate from your Recognised Membership Body.

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| **SECTION 7. PRACTISING CERTIFICATE FEES** |

**I am applying for a General Paralegal Practising Certificate (Tier 3 or above) at a cost of £205 per year plus £40.00 one-off experiential route administration charge**

**I am applying for a Specified Paralegal Practising Certificate (Tier 2 or above) at a cost of £155 per year plus £40.00 one-off experiential route administration charge**

There is an additional fee of £12 for certificates to be sent by post outside of the United Kingdom.

Please indicate if you require international postage

**Payment methods**

Bank transfer

Credit/debit card by phone

Paid via the website

**Bank**  : Santander

**Account Name** : The Professional Paralegal Register

**Account** : 38801343

**Sort Code**  : 09-01-29

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| **SECTION 8. DECLARATION** |

I declare that the information disclosed in this application form is true and that I have read and will comply with the Paralegal Practitioners’ Rules and Code of Conduct of the PPR. I will also ensure that I complete the requisite number of hours CPD required in order to renew my certificate on an annual basis and that I will inform the PPR of any change in my circumstances or event that may affect the validity of my practising certificate within fourteen calendar (14) days of the changes taking effect.

**Signed:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Dated:** Click or tap to enter a date.

**For office use only:**

PI Insurance Renewal Date

Recognised Body confirmation of suitability