

**FORM 1A**  
South Australia

**APPLICATION BY AN INDIVIDUAL FOR ISSUE OF PRACTISING  
CERTIFICATE**

To: The Registrar of the Legal Practitioners Registry

I make application for a practising certificate and I make the following statements in respect of this application:

1. (a) Applicant's family name: .....
- Other names: .....
- Home address: .....
- ..... Postcode: .....
- Home telephone number: ..... Email:.....
- Mobile telephone number.....
- (b) Firm name: .....
- Business address: .....
- .....
- ..... Postcode: .....
- Business telephone number:..... Email:.....
2. Date of birth: .....
3. Date and place first admitted as a legal practitioner .....
- .....
4. Date admitted as a legal practitioner in South Australia: .....
5. Have you been admitted in any other Australian jurisdiction? ... Yes/No.....
- if so, where .....
6. Is South Australia your principal place of practice? .....
7. How do you intend to practise in South Australia:
  - on your own behalf?
  - as a partner or principal?
  - as an employee?
  - as a director or shareholder of a legal practice companyState name of firm or company if different from above  
.....

If you practise in partnership, state the name(s) of your partner(s):

.....  
.....

8. Apart from your principal place of practice, state any other place(s) or intended place(s) of practice

.....  
.....

9. Are you required to take out professional indemnity insurance under a scheme under Section 52 of the *Legal Practitioners Act 1981*? .....

10. Do you identify yourself as Aboriginal and/or Torres Strait Islander? ... Yes/No.....

I declare that the above statements are true in every particular.

Dated: ..... / ..... / ..... Signature of Applicant: .....