



**THE LAW SOCIETY  
OF SOUTH AUSTRALIA**



# **The Law Society of South Australia Specialist Accreditation 2012**

## **Application form**



*Specialist Accreditation*

### **Contents of this kit:**

- Application form
- Reference form

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### **Key application dates**

#### Immigration Law

- Applications for Special Consideration close – No later than 4pm on **11 April 2012**
- All other applications close – No later than 4pm on **9 May 2012**

## **APPLICATION FOR ACCREDITATION AS A SPECIALIST**

<b>Specialty area of practice</b>	
LSSA Member number	
Full name	
Name as you wish it to appear on your certificate	
Name of firm or organisation	
Mailing address (All general mail will be sent to this address)	
DX	
Telephone	
E-mail	(personal/shared)
Nominated results address (All confidential mail including results will be sent to this address.)	

### **ELIGIBILITY FOR ACCREDITATION**

**Please circle “yes” or “no” for each of the following statements.**

Yes / No I am a member of the Law Society of South Australia

Yes / No I hold a current practising certificate

Yes / No I have been engaged in legal work after admission to practice for a total period equivalent to at least 5 years' full-time practice

Yes / No In each of the three years immediately preceding this application, I have been engaged in this area of practice

Yes / No The time I have devoted to this area of practice in each year of that 3-year period is at least 25 per cent of the time required to conduct a full-time practice

Yes/No\* Because I can not satisfy fully the prescribed conditions concerning eligibility, I request the Specialisation Board to exercise its discretion to accept my application

\* Note: Discretion of the Specialisation Board.

In exceptional circumstances, an applicant who cannot satisfy fully the conditions concerning

(a) years of experience in practice, or

(b) level of involvement in the area of practice, may be accepted as a candidate at the discretion of the Specialisation Board.

A written request that the Board exercises its discretion to accept the application should be submitted with this application. The submission should include a comprehensive curriculum vitae and supporting documentation. For assistance, phone (03) 9607 9461.

# EXPERIENCE IN PRACTICE DETAILS

I was admitted to practice in Australia in the city of \_\_\_\_\_ on the date of \_\_\_\_\_

(If first admitted in another place, please provide details)

Place \_\_\_\_\_ Date \_\_\_\_\_

I have gained my experience in practice with the firms and organisations listed below:

Firm/Organisation	Dates/ Years	Full-Time / Part-Time *

\*Note: Include at least the most recent five years in practice. Please provide details on a separate sheet explaining the circumstances surrounding any part-time positions listed.

The time I have devoted to this area of practice in each of the following years is:

Year	Approximate percentage of full-time practice
2011	%
2010	%
2009	%
2008	%

Note: Please provide details on a separate sheet if you have not been continuously in practice over the past 3 years.

I am currently accredited as a Specialist in the following area(s) of practice:

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Note: A practitioner who seeks accreditation in more than two areas of practice must obtain the permission of the Board before undertaking any further assessment.

# REFEREES

*I submit three written references from persons listed below who can attest to my competence and my involvement in this area of practice.*

Note:

- 1 Referees are expected to provide information concerning this application to the Specialisation Board on a confidential basis if requested to do so.
- 2 Referees must have known the applicant for at least three years.
- 3 At least one referee must be a legal practitioner with at least five years experience in practice, who is significantly involved in the area of practice. A referee who is not a legal practitioner must have appropriate experience in a field closely related to the area of practice.
- 4 None of the following is eligible to act as a referee:
  - partner, associate, employer, employee, (ie another member of the applicant's firm) or relative of the accredited specialist applicant;
  - Specialisation Board member or member of the Advisory Committee in the area of practice;
  - current applicant in the same area of law;
  - staff member of the LIV or The Law Society of South Australia;
  - Member of the Professional Standards Committee of the Law Society of South Australia.

1 Name \_\_\_\_\_  
Profession / Occupation / Position \_\_\_\_\_  
Firm / Employer \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_ DX \_\_\_\_\_  
Ph: \_\_\_\_\_

2 Name \_\_\_\_\_  
Profession / Occupation / Position \_\_\_\_\_  
Firm / Employer \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_ DX \_\_\_\_\_  
Ph: \_\_\_\_\_

3 Name \_\_\_\_\_  
Profession / Occupation / Position \_\_\_\_\_  
Firm / Employer \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_ DX \_\_\_\_\_  
Ph: \_\_\_\_\_

**COMPLETED REFERENCE FORMS SHOULD BE FORWARDED WITH THIS APPLICATION**

## DECLARATION

- Yes / No I have read the *Specialisation Scheme Rules* (effective 2011) and agree to be bound by those Rules, as amended from time to time.
- Yes/No I consent to either the Law Society of South Australia Executive Committee or the Specialisation Board making such enquiries as it sees fit to determine my eligibility and my suitability for accreditation as a specialist.
- Yes/No I agree to attend a personal interview before either the Law Society of South Australia Executive Committee or the Specialisation Board of the LIV if requested.
- Yes/No I agree to abide by all rules, guidelines and standards set by the Specialisation Board of the LIV, as amended from time to time.
- Yes/No I authorise either the Law Society of South Australia Executive Committee or the Specialisation Board and/or its nominated agents to make all necessary inquiries with the Legal Services Board, Legal Services Commissioner and/or Law Institute of Victoria Limited or equivalent state or territory body in relations to any findings of unsatisfactory conduct or misconduct which may have been made against me. (Note: if you do not provide the authorisation requested, the Specialisation Board may decline your application).
- Yes/No In the event that either the Law Society of South Australia Executive Committee or the Specialisation Board and/or its nominated agents requires the release of information by the Legal Services Board, Legal Services Commissioner, Law Institute of Victoria Limited or equivalent state or territory body, I undertake to provide all necessary consents and approvals to obtain any information concerning any findings of unsatisfactory conduct or misconduct under the *Legal Practice Act 1996*, *Legal Profession Act 2004* or equivalent legislation of any state or territory body. (Note: if you do not provide the undertaking requested, the Specialisation Board may decline your application).
- Yes/No I agree that an administration fee of \$110 (GST included) will be withheld if I withdraw from the accreditation process after the application closing date and that no refund will be available under any circumstances for any withdrawal after 30 June 2012, as all examination arrangements will be finalised after this date.
- Yes/No I understand that as per Specialisation Scheme rule 4.7.4 any special consideration application must be made within two days of the particular assessment which it pertains to.

I declare the contents of this application to be true.

**Signature of Applicant** \_\_\_\_\_ **Date** \_\_\_\_\_

To apply please forward:

- Completed application form
- Three references
- Resume of Practice which includes a history of your practice to date including areas of law that you have worked in and major projects/ file types you have worked on.
- Additional material as specified
- Cheque in the sum of \$1150.00 (including GST and a \$50 interstate application fee) made payable to the "**Law Institute of Victoria**" or credit card details completed on the form below

### Return to:

Education Section  
The Law Society of South Australia  
GPO Box 2066  
ADELAIDE SA 5000, DX 333

**ACCREDITED SPECIALISATION – REFERENCE FORM**

**THE SPECIALISATION BOARD LAW INSTITUTE OF VICTORIA /  
EXECUTIVE DIRECTOR OF THE LAW SOCIETY OF SOUTH AUSTRALIA**

REFERENCE FOR A LEGAL PRACTITIONER SEEKING ACCREDITATION AS A SPECIALIST

**Applicant's name** \_\_\_\_\_

**Area of Practice of Applicant** \_\_\_\_\_

The practitioner named above has applied for accreditation as a Specialist under the LIV's Specialisation Scheme in collaboration with the Law Society of South Australia. You have been nominated to attest to the applicant's competence and involvement in the area of practice. The Law Society of South Australia Executive Committee and the Specialisation Board of the Law Institute of Victoria requests your cooperation in completing the statement of reference below in a frank and objective manner. If you require more space, please attach additional sheets. After completing the statement, **please return it to the applicant.**

**Name of referee** \_\_\_\_\_

**Profession / Occupation / Position** \_\_\_\_\_

**Firm / Employer** \_\_\_\_\_

**Address** \_\_\_\_\_

\_\_\_\_\_ **DX** \_\_\_\_\_

**Ph:** \_\_\_\_\_

**STATEMENT OF REFERENCE**

Please tick the appropriate boxes

- |    |     |   |     |    |
|----|-----|---|-----|----|
| 1  | (a) | I am a legal practitioner with five years experience  | Yes | No |
|    |     | I am significantly involved in the area of practice under consideration (at least 25%)                      | Yes | No |
|    |     | I am a practising solicitor   | Yes | No |
|    |     | I am a barrister  | Yes | No |
| Or | (b) | I am not a legal practitioner, but a person with a significant involvement in the field under consideration | Yes | No |

(please specify) \_\_\_\_\_  
\_\_\_\_\_

2 I have known the applicant since the year (date) \_\_\_\_\_

3 I have formed the following opinion of the applicant's competence in this area of practice:  
\_\_\_\_\_

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4 I have had the following opportunities to form this opinion: (Please provide details of the specific circumstances and frequency of contact with the applicant)

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*I certify that the information in this statement is given from personal knowledge and is true and correct in every particular.*

Signature \_\_\_\_\_ Date \_\_\_\_\_

Please return this statement to the **applicant**, and not the Law Society of South Australia or Law Institute of Victoria.

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  - Specialisation Board member or member of the Advisory Committee in the area of practice;
  - current applicant in the same area of law;
  - staff member of the LIV or The Law Society of South Australia;
  - Member of the Professional Standards Committee of the Law Society of South Australia.