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| **INTERNATIONAL PROTECTION SOLICITORS PANEL****Application to be entered onto the PanelClosing Date: 5.00 pm Friday 2nd September, 2022.** |  |

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| Name |       |
| Address |       |
| Email |       |
| Telephone Number |       | VAT Number |       |

Please indicate which areas you are willing to serve at by placing a tick in the box of the appropriate areas below

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| Dublin – Smithfield Law Centre Catchment AreaDublin, Kildare, Wicklow, Carlow, Kilkenny, Laois, Offaly, Meath, Louth, Wexford, Tipperary (except Carrick-on-Suir), Cavan, Monaghan |       |
| Galway – Seville House Law Centre Catchment AreaGalway, Mayo, Sligo, Leitrim, Roscommon, Clare, Limerick, Donegal, Westmeath, Longford |       |
| Cork – Popes Quay Law Centre Catchment AreaCork, Kerry, Waterford, Tipperary (Carrick-on-Suir only) |       |

NB: Applicants must also return the signed form of undertaking below.

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| I confirm that I am not currently and have never been the subject of any disciplinary proceedings relating to my professional conduct before any committee, tribunal, court or other similar body, other than proceedings in which the complaint has been found to be unwarranted. If “No”, please provide further details on an additional page.  | [ ]  Yes [ ]  No |
| I confirm that I am willing to provide legal services in accordance with the Civil Legal Aid Act 1995 and the Terms and Conditions of the Scheme as may be determined from time to time by the Board. | [ ]  Yes [ ]  No |
| I confirm that I hold a current practising certificate from the Law Society of Ireland and that I shall notify the Board immediately in the event of my ceasing to hold such a certificate at any time. | [ ]  Yes [ ]  No |
| I confirm that I am covered by professional indemnity insurance for a claim of up to €1.5m and that I shall notify the Board in the event of this not being the case at any time. | [ ]  Yes [ ]  No |
| I confirm that I was admitted to the Roll of Solicitors in Ireland on: |  \_\_\_\_/\_\_\_\_\_/\_\_\_\_\_\_ |
| I agree to participate in training being organised by the Board in September 2022 for the purposes of participation in this scheme | [ ]  Yes [ ]  No |
| I agree to undergo such further training as may be deemed necessary from time to time by the Board | [ ]  Yes [ ]  No |
| I have already received formal training in refugee law If yes please provide details:  | [ ]  Yes [ ]  No |
|  |
| I have practical experience in refugee lawIf yes please provide details: | [ ]  Yes [ ]  No |
|  |
| I confirm that I am in compliance with the current tax clearance procedures for public sector contracts. | [ ]  Yes [ ]  No |
| I confirm that I have access to email facilities and that the IT software used by me is compatible with Microsoft Office software and that I am willing to abide by the Board’s requirement to send confidential emails using the Board’s secure email facility. | [ ]  Yes [ ]  No |
| I declare that I have no medical condition that would render me unfit to provide the required service. I agree to the Board reserving the right at all times to refer me to a medical practitioner in order to confirm my fitness in this respect. | [ ]  Yes [ ]  No |

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| Name of solicitor to be entered on panel  |       |  | Date |       |
| Signature |       |  | Withholding Tax No.  |       |
| Address |       |  | VAT No. |       |