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|  |  | **LAW LIBRARY**  **APPLICATION FOR ADMISSION BY A FORMER MEMBER** | | | | | | | | | | | | | | |  | | | | | | |
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| Direct dial in &/or voicemail required? | | |  | | | | | | | | | | | | | |  | | | | | | |
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| **Required Date of Re-Admission:** | | |  | | | | | | | | | | | | | |  | | | | | | |
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| **Proof of PII** | | | | | |  | |  | |  | | | |  | | |  | |  | | |  | | | | |
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| I have attached to this application the required proof of PII cover \*SEE BELOW NOTE | | | | |  | | | | | | | | |  | | |  | | | | | | |
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| **Educational Record:** | |  | Date and Term of Call to the Bar **(if you were voluntarily disbarred, please advise original call date, date disbarred and new call date**): | | | | | | | | | | | | | |  | | | | | | |
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|  |  |  | University(s) Attended and Degree(s) obtained: | | | | | | | | | | | | | |  | |  | | | | |
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|  |  |  | Post Graduate Qualifications (other than Kings Inns): | | | | | | | | | | | | | |  | |  | | | | |
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| **Previous Membership of the Law Library:** | | | | | |  | |  | |  | | | |  | | |  | |  | | |  | | | | |
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| Applicants who are applying for re-entry following a period of 2 years or more are obliged to:   * Prepare a **Learning Plan** which identifies learning goals for the initial period of their return to practice * Complete Returner Professional Development applicable to the type of practice they will be returning to.   Work towards completing these requirements can be commenced up to 3 months prior to the intended date of re-entry and the returner must fully complete their return to practice requirements within 3 months of re-entry. For further information see [Return to Practice Requirements](https://pd.lawlibrary.ie/ReturnToPractice).  Members of The Bar of Ireland CPD Team are available to support members with queries related to their engagement in CPD and the return to practice requirements. Please contact [cpd@lawlibrary.ie](mailto:cpd@lawlibrary.ie)  If you have been away from practice for a long period of time, please advise if there is any further support you require to re-enter membership at this time. | | | | | | | | | | | | | | | | |  | | | | | | |
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| Name of Former Pupil Master: | | |  | | | | | | | | | | | | | |  | | | | | | |
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| Membership of Other Bars: | | |  | | | | | | | | | | | | | |  | | | | | | |
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| **If you have been practising as a barrister in another jurisdiction, please provide a certificate of good standing.**  **If you have been a solicitor in Ireland or another jurisdiction, please submit confirmation from the relevant agency that you have been removed from the roll of Solicitors, it is not compatible to be dual qualified and a member of the Law Library.** | | | | | | | | | | | | | | | | |  | | | | | | |
| Have you had any complaints made against you while you were previously a | | | | | | | | | | | | | |  | | |  | | | | | | |
| Member of the Law Library? | | |  | | | |  | |  | |  | | | |  |  | | | |  | | |  | | | | |
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| Have you been investigated in relation to any potential breaches of the Code | | | | | | | | | | | | | |  | | |  | | | | | | |
| of Conduct while you were originally a Member of the Law library? | | | | |  | | | | | | | | |  | | |  | |  | | |  | | | |
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| \*If yes to either of above please provide a separate note to explain.  **Employment Record:** | | | | | |  | |  | |  | | | |  | | |  | |  | | |  | | | | |
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| **Declaration & Notes:** | |  |  | | | |  | |  | |  | | | |  |  | | | |  | | |  | | | | |
|  | I hereby apply for re-admission to membership of the Law Library.  I confirm that I have fully and truthfully answered the questions set out herein. | | | | | | | | | | | | |  | | |  | |  | | |  | | | |
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|  | I am aware that if any information furnished by me herein or at any interview arising from my application is incorrect that I may, - at the discretion of the Council of The Bar of Ireland, be excluded from membership of the Law Library. | | | | | | | | | | | | | | | |  | |  | | | | |
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|  | It is essential that any person applying for membership of the Law Library be familiar with [Rules of Membership of the Law Library](https://www.lawlibrary.ie/about/governance/rules-of-membership/), [Code of Conduct for The Bar of Ireland](https://www.lawlibrary.ie/about/governance/code-of-conduct/) and the [Constitution of the General Council of The Bar of Ireland](https://www.lawlibrary.ie/about/governance/constitution/) and any amendments that might be made to it from time to time. Members of the Professional Practices Committee are always available to give guidance or interpretation of the Code when requested by any member or prospective member of the Library. I confirm that I agree to abide by the terms of the Code of Conduct for The Bar of Ireland.  \* **PII Note:** LSRA Regulation S.I. Number 572, this provides that barristers practising in Ireland (including those based in Other Jurisdictions and working in Ireland intermittently) must now purchase professional indemnity insurance from an insurer *“…licensed and authorised to transact business in Ireland”* (Part IV paragraph 9). [http://www.irishstatutebook.ie/eli/2019/si/572/made/en/print](https://eur03.safelinks.protection.outlook.com/?url=http%3A%2F%2Fwww.irishstatutebook.ie%2Feli%2F2019%2Fsi%2F572%2Fmade%2Fen%2Fprint&data=02%7C01%7C%7C6fff9ca072f24e05beeb08d79a7971c6%7Cf5f1eeaa96d047c296dcf9c7d0a610a0%7C0%7C0%7C637147719058939132&sdata=6E8wzrn%2B5Rj4GK3db0RhTfkzOJeUnnBbHlmHlh05b%2Fw%3D&reserved=0) The insurer must also meet the minimum financial strength rating.  **LSRA HAS FORMALLY APPROVED THE BAR OF IRELAND GROUP SCHEME OF PROFESSIONAL INDEMNITY INSURANCE (PII)**  **NB** If **previous account arrears** exist, arrangements must be in place or payments must be made, before a re-entry application can be processed by the Library Committee. Please contact Member Accounts at [member.accounts@lawlibrary.ie](mailto:member.accounts@lawlibrary.ie) to make arrangements where necessary.  **NB If you are re-entering, within 1 month of exclusion, where the exclusion was for CPD non-compliance** you must submit your CPD record to the Education and Training Committee (ETC) demonstrating that you are in compliance with the [CPD requirements](https://pd.lawlibrary.ie/CPDrequirements)  for the year prior to your exclusion.  Such compliance must be confirmed by ETC before re-entry can be considered by Library Committee.  Do you consent to the processing of your personal data, including your photo? This information is required for the purpose of security and for processing this re-entry application, by the Bar Council and The Bar of Ireland staff. The data is retained for the duration of your membership.  Yes     1. As of the date of making this application I can confirm that I have no criminal conviction for an offence involving dishonesty or for a criminal offence which might bring the barrister profession into disrepute. I confirm that there is no known pending case in which such a criminal conviction might arise. Should a criminal conviction arise in the course of my membership of the Law Library it will be reported forthwith to the Library Committee   Indicate confirmation by checking this box   |  | | --- | |  |  1. As of the date of making this application I can confirm that I have no civil judgements involving dishonesty or fraud, or which might bring the barrister profession into disrepute. I confirm that there is no known pending case in which such a judgement might arise. Should such a judgement arise in the course of my membership of the Law Library it will be reported forthwith to the Library Committee  |  | | --- | |  |   Indicate confirmation by checking this box  If an applicant has any doubt about the status of a judgment for the purposes of an application, they should disclose it, as a matter of caution and the matter can be discussed at your pre-admission interview.   1. As of the date of making this application I can confirm that I have not been restricted or prohibited from acting as a company director and there is no case pending in which such an Order might arise. Should such an Order arise in the course of my membership of the Law Library it will be reported forthwith to the Library Committee  |  | | --- | |  |   Indicate confirmation by checking this box | | | | | | | | | | | | | | | |  | |  | | | | |
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