

European Lawyers' Programme Application Form 2015

Please complete all sections of this form in ENGLISH in black ink (typed if possible) and attach a full CV and any supplementary information.

1. PERSONAL DETAILS

Family name: _____ (If more than one, please underline the one which determines your alphabetical listing)	
Other names: _____ (If more than one, please underline the one by which you are known)	
Date of Birth (dd/mm/yy): ____/____/____	Male/Female
Place of Birth: _____	Nationality: _____

2. CONTACT INFORMATION

Please give the address at which you can be contacted routinely throughout 2014/15, including full country and area codes for telephone and fax numbers

Address: _____ _____	
Telephone: _____	Mobile: _____
Fax: _____	E-mail: _____

3. PRESENT EMPLOYMENT



Employer/Organisation: _____

Current job title: _____

Work address: _____

4. PRESENT RESPONSIBILITIES

What are your current responsibilities/duties? _____

5. PREVIOUS RELEVANT WORK EXPERIENCE

Please give dates and details of all your other law-related employment experience, starting with the most recent.

6. EDUCATION AND QUALIFICATIONS

Please give details of your university/college education in chronological order, starting with the most recent, stating specific qualifications and grades gained.

Institution	Course Title	Dates	Qualifications/ Grades	Tuition in English? (Yes/No)

7. FURTHER QUESTIONS RELATING TO YOUR APPLICATION

What is your proposed career development in your own country? _____	

Do you have any knowledge of UK law?	Yes/No
If yes, please give details _____	

In order of preference, which areas of law and legal practice are you most interested in? _____	

Are you currently applying for any other awards in the UK?	Yes / No
If yes, please give dates and details _____	

8. REFEREES

Please give the names, positions and titles of two people whom you are asking to write in support of your application.

Referee 1	Referee 2
Name: _____	Name: _____
Job Title: _____	Job Title: _____
Organisation: _____	Organisation: _____

9. HOBBIES AND INTERESTS

10. LANGUAGES AND TRAVEL

Have you visited the UK before?	Yes / No
If yes, please give details and dates: _____	

Which other countries have you visited? _____	

Which languages besides English do you speak? Please state level of fluency (i.e. Basic/Working knowledge/Fluent) _____	

11. HEALTH

Do you have any special medical, physical or dietary needs? **Yes / No**

Please give details below if applicable. Note that if selected for the Programme, you will be asked to complete a Declaration of Health form before your place is confirmed.

12. REASONS FOR APPLYING

Please state your objectives in applying for this Programme.

13. DISCLOSURE

The European Lawyers Association will use the information you have given on this form to assess you for the European Lawyers Programme, and if you are successful the details will be used to administer the Programme.

Your information will be passed to the Faculty of Advocates in Edinburgh and to other legal organisations to arrange appropriate placements during your stay in Scotland.

14. DECLARATION

I declare that the above statements are true and accept that my participation in the Programme may be brought to an end if any statement proves to be false.

I confirm that if selected I will be released from my present employment or otherwise be available for the full duration of the Programme in the United Kingdom.

I undertake:

- that if I am offered a place on the Programme, I will participate fully and will spend the whole of the relevant period in the United Kingdom;
- that I will inform the organisers if I am in contact with any solicitor, barrister or advocate in the United Kingdom regarding an attachment during the Programme;
- that I will inform the European Lawyers Association if, after signing this application, I apply for any other award for study in the United Kingdom.

Signature	Date / /
------------------	---------------------