|  |  |
| --- | --- |
| ADMITTED (Inns use only) | ADMISSION No. (Inns use only) |
|  |  |

Gray’s Inn

Four Inns of Court and General Council of the Bar

**This form must be completed in BLOCK CAPITALS by every applicant for admission to an Inn of Court.**

# SECTION 1

Please give your full name as shown on your passport.

|  |  |  |  |
| --- | --- | --- | --- |
| Title: |       | Forenames: |       |
| Surname: |       |
| Correspondence Address:      Postcode:      | Permanent Home Address:      Postcode:      |
| Telephone number: |       | Name and address of next of kin:      Postcode:     Telephone number:      |
| Mobile Phone number: |       |
| Email Address: |       |
| Date of Birth: |       |
| Nationality: |       |

SECTION 2 UK AND REPUBLIC OF IRELAND QUALIFICATIONS

(1) Law Degree

If you have, or expect to have, a law degree conferred by a University in the UK or Republic of Ireland, please complete this section.

|  |  |  |  |
| --- | --- | --- | --- |
| Institution | Degree & Subject | Class  | Date Awarded |
|       |       |       |       |
| Internal [ ]  | External [ ]  |

(2) Other Undergraduate Degree

 If you originally studied a non-law degree, complete this section.

|  |  |  |  |
| --- | --- | --- | --- |
| Institution | Degree & Subject | Class | Date Awarded |
|       |       |       |       |
| Internal [ ]  | External [ ]  |

(3) CPE or Postgraduate Diploma in Law

 If you hold, or expect to hold, a CPE or Postgraduate Diploma in Law, please complete this section.

|  |  |  |  |
| --- | --- | --- | --- |
| Institution | Degree & Subject | Class | Date Awarded |
|       |       |       |       |

(4) Higher Qualifications

 If you hold or are studying for a higher / non-standard qualification (e.g. MA / LLM), please complete this section.

|  |  |  |  |
| --- | --- | --- | --- |
| Institution | Degree & Subject | Class | Date Awarded |
|       |       |       |       |

Please enter below the details of your Certificate of Academic Standing

|  |  |
| --- | --- |
| Certificate Number | Date of Issue |
|       |       |

SECTION 3 QUALIFICATIONS GAINED OUTSIDE THE UK OR REPUBLIC OF IRELAND

(1) If you have a degree conferred by a University outside the UK or Republic of Ireland, please complete this section.

|  |  |  |  |
| --- | --- | --- | --- |
| Institution | Degree & Subject | Class | Date Awarded |
|       |       |       |       |

 Please enter below the details of your Certificate of Academic Standing

|  |  |
| --- | --- |
| Certificate Number | Date of Issue |
|       |       |

(2) Set out below the GCE, GCSE, British Council or equivalent English Language qualification(s) you hold.

|  |  |  |  |
| --- | --- | --- | --- |
| Examining Body | Level | Grade | Date Awarded |
|       |       |       |       |

SECTION 4 MATURE STUDENTS

If you are applying as a mature student please enter details of any qualifications you hold, e.g. GCSE, GCSE O’ Levels and A’ Levels, GNVQs or equivalents, passes in professional examinations and / or any membership of professional bodies.

|  |  |  |  |
| --- | --- | --- | --- |
| Type of Qualification / Professional Body | Subject | Grade | Year |
|       |       |       |       |

SECTION 5 THE ADMISSION OF QUALIFIED LEGAL PRACTITIONERS

|  |  |
| --- | --- |
| Decision date of the Bar Standards Board’s Qualifications Committee: |       |

SECTION 6 (to be completed by all applicants)

|  |  |
| --- | --- |
| Do you intend to practise at the Bar of England and Wales |       |
| In which academic session do you intend to enrol for the Bar Professional Training Course? |       |
| At which institution do you intend to study the Bar Professional Training Course? |       |
| Have you ever applied to another Inn of Court?If ‘yes’, which Inn, when and what was the outcome? |       |
| Are you in receipt of a Gray’s Inn Scholarship for the GDL/CPE or BPTC? |       |
| The Inn adheres to the General Data Protection Regulation 2016/679 (the 'GDPR'). The Inn’s Data Privacy Notice is published at <https://www.graysinn.org.uk/data-privacy-notice>. [ ]   By ticking this box I confirm that I have read the Inn’s Data Privacy Notice and consent to the processing of my personal data in line with this statement. |

Signature …………………………………………………. Dated ............../.................../..................

The Honourable Society of Gray's Inn

Admission Declaration

To the Masters of the Bench of the Honourable Society of Gray’s Inn

I, (full names[[1]](#footnote-1))

of (home address)

Email:      Tel:

Date of Birth:

for the purpose of obtaining admission as a member of the Inn do hereby **declare and undertake** as follows:-

1. My present occupation is

2. (a) I have never been convicted of any criminal offence[[2]](#footnote-2) nor are there any proceedings pending[[3]](#footnote-3) against me anywhere in respect of any criminal offence.

(b) I have never been convicted of a disciplinary offence by a professional or regulatory body nor are there any disciplinary proceedings pending against me anywhere in respect of any such offence.

(c) I have never been found guilty of an academic offence by a higher education institution[[4]](#footnote-4)

(d) I have never had any bankruptcy order[[5]](#footnote-5) debt relief order[[6]](#footnote-6), directors disqualification order[[7]](#footnote-7) bankruptcy restrictions order[[8]](#footnote-8) or debt relief restrictions order made against me nor entered into an individual voluntary arrangement with creditors.

(e) I have not previously been refused admission to or expelled from an Inn.

(f) I do not suffer from serious incapacity due to mental disorder (within the meaning of the Mental Health Act 1983) nor addiction to alcohol or drugs, nor from any other condition which might impair my fitness to become a practising barrister.[[9]](#footnote-9)

*If any of the statements in paragraph 2 above is incorrect in any respect, please delete the statement as appropriate.*

3. Except as disclosed below, I am not aware of any matter which might reasonably be thought to call into question my fitness to become a practising barrister.[[10]](#footnote-10)

*If you delete any of the statements in paragraph 2 above or there is any other matter which might reasonably be thought to call into question your fitness to become a practising* *barrister, please give details in the box below – use a continuation sheet if necessary and attach supporting documents. (****If giving details of a criminal conviction, please ensure you specify the sentence****.)*

4. I am a disabled person within the meaning of the Equality Act 2010 and would like to discuss with the Inn what, if any, reasonable adjustments need to be made to enable me to participate in all aspects of the Inn’s activities.

**YES [ ]  NO[ ]**

5. If requested by the Inn, I undertake to apply or to assist the Inn in applying to the Criminal Records Bureau for disclosure about me.

* 1. I undertake that I will inform the Inn immediately if any statement made in this Declaration ceases to be true before I have been admitted to the Inn and while I am an applicant for admission to the Inn.

7. I undertake that while I am a Student member of the Inn:-

(a) I will comply with such regulations as are made by the Inn concerning the conduct and discipline of its Students[[11]](#footnote-11);

(b) If and in so far as they apply to me, I will comply with the BSB Handbook;

(c) I will promptly inform the Under Treasurer (or Sub-Treasurer) of the Inn in writing if:

(i) there are proceedings pending against me in respect of a criminal offence or I am convicted of a criminal offence; or

(ii) there are disciplinary proceedings pending against me or I am convicted of a disciplinary offence by a professional or regulatory body; or

(iii) I have a bankruptcy order or director’s disqualification order made against me or enter into an individual voluntary arrangement with creditors; or

(iv) I am found guilty by the course provider of cheating or other misconduct on a Bar Professional Training Course or am found guilty of an academic offence by a higher education institution.

8. I have read and understood the terms of the further Declaration which I will be required to sign before I can be called to the Bar.

9. I will inform the Inn of any change to my name or address.

10. I will commence the Vocational Stage within five years of admission to the Inn and complete that Stage within ten years of admission on the understanding that if I fail to comply with either of those requirements my membership of the Inn will cease on the expiration of either period.

Signature………………………………… Dated ............../............../..............

The Honourable Society of Gray's Inn

Certificate of Good Character

I,(name)      (job title[[12]](#footnote-12))

of (address[[13]](#footnote-13))

Email:       Tel:

certify that I have known (name of applicant)

of (address of applicant)

for       year(s) and that I have had the following opportunities of judging his/her character:

I believe the applicant to be of good character and am not aware of any fact about the applicant which gives me any reason to expect that, if admitted to any of the Inns of Court, he/she will engage in any conduct which is dishonest or which otherwise renders him/her unfit to become a practising barrister.

I do not have a close family or personal relationship with the applicant.

I have read the Admission Declaration signed by applicant and dated

and believe the information given in it to be true.

 Signature………………………………… Dated ............../............../..............

**THE HONOURABLE SOCIETY OF GRAY’S INN**



EDUCATION DEPARTMENT

8 SOUTH SQUARE, LONDON WC1R 5ET

Tel: 020 7458 7900 Fax: 020 7458 7937

**Notes to referees**

Individuals applying for membership of The Honourable Society of Gray's Inn are required to provide two Certificates of Good Character from a professional person or person of standing in the community who:

* 1. has known them for at least twelve months;
	2. does not have a close family or personal relationship with them; and
	3. has read their admission declaration form

The Inn considers ‘a professional person or person of standing in the community’ to be one of the following (please note that referees must be *currently* working in one of these roles):

|  |  |
| --- | --- |
| * Judge
 | * University lecturer
 |
| * Magistrate
 | * Officer of the British armed forces
 |
| * Barrister
 | * Senior police officer
 |
| * Solicitor
 | * Doctor (medical)
 |
| * Member of Parliament
 | * Dentist
 |
| * Accountant
 | * Senior nurse
 |
| * Secondary school teacher
 | * Pharmacist
 |
| * Professor
 |  |

The applicant should provide referees with a blank Certificate of Good Character form (only the applicant’s name and contact details may be completed by the applicant) and a copy of their Admission Declaration form.

When completing a certificate of good character please ensure the following information is provided:

* Your full name
* Your job title
* Your work address (including the name of the organisation for which you work)
* The name and address of the applicant
* The number of years you have known the applicant
* A description of how you know the applicant
* The date the applicant signed their Admission Declaration form
* The date you completed the Certificate
* Your signature

Please return the Certificate of Good Character with the copy of the Admission Declaration form which has been provided to you by the applicant.

Many thanks for your assistance.

The Honourable Society of Gray's Inn

Certificate of Good Character

I,(name)      (job title[[14]](#footnote-14))

of (address[[15]](#footnote-15))

Email:       Tel:

certify that I have known (name of applicant)

of (address of applicant)

for       year(s) and that I have had the following opportunities of judging his/her character:

I believe the applicant to be of good character and am not aware of any fact about the applicant which gives me any reason to expect that, if admitted to any of the Inns of Court, he/she will engage in any conduct which is dishonest or which otherwise renders him/her unfit to become a practising barrister.

I do not have a close family or personal relationship with the applicant.

I have read the Admission Declaration signed by applicant and dated

and believe the information given in it to be true.

 Signature………………………………… Dated ............../............../..............

**THE HONOURABLE SOCIETY OF GRAY’S INN**

EDUCATION DEPARTMENT

8 SOUTH SQUARE, LONDON WC1R 5ET

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* 1. has known them for at least twelve months;
	2. does not have a close family or personal relationship with them; and
	3. has read their admission declaration form

The Inn considers ‘a professional person or person of standing in the community’ to be one of the following (please note that referees must be *currently* working in one of these roles):

|  |  |
| --- | --- |
| * Judge
 | * University lecturer
 |
| * Magistrate
 | * Officer of the British armed forces
 |
| * Barrister
 | * Senior police officer
 |
| * Solicitor
 | * Doctor (medical)
 |
| * Member of Parliament
 | * Dentist
 |
| * Accountant
 | * Senior nurse
 |
| * Secondary school teacher
 | * Pharmacist
 |
| * Professor
 |  |

The applicant should provide referees with a blank Certificate of Good Character form (only the applicant’s name and contact details may be completed by the applicant) and a copy of their Admission Declaration form.

When completing a certificate of good character please ensure the following information is provided:

* Your full name
* Your job title
* Your work address (including the name of the organisation for which you work)
* The name and address of the applicant
* The number of years you have known the applicant
* A description of how you know the applicant
* The date the applicant signed their Admission Declaration form
* The date you completed the Certificate
* Your signature

Please return the Certificate of Good Character with the copy of the Admission Declaration form which has been provided to you by the applicant.

Many thanks for your assistance.

INNS’ EQUAL OPPORTUNITIES QUESTIONNAIRE

In line with the Inns’ Equal Opportunities Policy and Code, the Inns collect information on ethnic origin, gender, disability, university attended, degree classification and intentions as to future practice from all applicants for Inn membership and scholarships so that the effectiveness of the Policy and Code can be assessed.

The ethnic origin categories and codes are those used in the 2011 census and are recommended by the Bar Council. The information collected will be treated as confidential. It will be used to compile statistical analyses and reports and will not be released to anyone in a way which might identify any individual. The data collected will not be used in any selection process and is kept only for monitoring purposes.

## Name:

**1. What is your ethnic group?**

Choose one section from (a) to (e) and then place a tick in the appropriate square bracket to indicate your cultural background.

(a) **White**

British / English / Welsh / Northern Irish / Scottish [ ]  [ 01 ]

Irish [ ]  [ 02 ]

Gypsy or Irish Traveller [ ]  [ 03 ]

Any other white background – *please write in below* [ ]  [ 04 ]

(b) **Mixed**

 White and Black Caribbean [ ]  [ 05 ]

 White and Black African [ ]  [ 06 ]

 White and Asian [ ]  [ 07 ]

 Any other mixed / multiple ethnic background – *please write in below* [ ]  [ 08 ]

(c) **Asian or Asian British**

 Indian [ ]  [ 09 ]

 Pakistani [ ]  [ 10 ]

 Bangladeshi [ ]  [ 11 ]

 Chinese [ ]  [ 12 ]

 Any other Asian background – *please write in below* [ ]  [ 13 ]

(d) **Black or Black British**

 African [ ]  [ 14 ]

 Caribbean [ ]  [ 15 ]

 Any other Black / African / Caribbean background – *please write in below* [ ]  [ 16 ]

(e) **Other ethnic group**

 Arab [ ]  [ 17 ]

Any other – *please write in below* [ ]  [ 18 ]

(f) **Unwilling to supply information** [ ]

**2.** Please indicate your gender by ticking as appropriate: **MALE** **[ ]  FEMALE** **[ ]**

**3.** Do you consider yourself to have a disability? **YES** **[ ]  NO** **[ ]**

If yes, we would be grateful if you would provide a brief description of the nature of your disability so that we are aware of your requirements:

**4.** Do you intend to practise at the Bar of England and Wales? **YES** **[ ]  NO** **[ ]**

###### Griffin Black and whiteTHE HONOURABLE SOCIETY OF GRAY’S INN

EDUCATION DEPARTMENT, 8 SOUTH SQUARE, LONDON WC1R 5ET

Tel: 020 7458 7900 Fax: 020 7458 7937

**Additional Information**

|  |  |
| --- | --- |
| Please provide the following information for our records: |  |
| Name:        |  |
| **Academic e-mail address:** |  |
| **Personal e-mail address:**  |  |
|  |  |
| **Do you intend to study the BPTC full or part time?** | **[ ]  Full time** **[ ]  Part time**  |
|  |  |
| **Please confirm the address to which you would like your membership pack sent:** | **[ ]  Correspondence** **[ ]  Permanent**  |

**THE HONOURABLE SOCIETY OF GRAY’S INN**



EDUCATION DEPARTMENT, 8 SOUTH SQUARE, LONDON WC1R 5ET

Tel: 020 7458 7900 Fax: 020 7458 7937

**Admissions Checklist**

|  |  |  |
| --- | --- | --- |
|  | **Please ensure your application includes the following:** |  |
| 1 | **Four Inns of Court and General Council of the Bar form**Filled out in block capitals with your name as it appears on your passportPlease complete sections 1 – 6 if applicable. | [ ]  |
| 2 | **Admission Declaration form** 1 original Admission Declaration form | [ ]  |
| 3 | **2 Certificates of Good Character** Please ensure that referees have provided their full name, job title/s, work address/es and have confirmed that they have viewed your Admission Declaration by completing the final paragraph. Certificates of Good Character must be original signed copies. | [ ]  |
| 4 | **Certified copies of qualification certificates**Any copied certificates should hold an *official stamp* and the certifier should state that it is ‘*a true likeness of the original’.* | [ ]  |
| 5 | **Admission fee**Please enclose a cheque, postal order or bankers draft for £100 made payable to Gray’s Inn. NO CASH | [ ]  |
| 6 | **2 Passport photos** | [ ]  |
| 7 | **Equal Opportunities form** | [ ]  |
| 8 | **Additional Information form** | [ ]  |
| 9 | **Photocopy of photographic ID** | [ ]  |

Signature ………………………….. Date ............./.............../..............

1. Give your name as shown on your passport. [↑](#footnote-ref-1)
2. For this purpose a “criminal offence" means any offence under the criminal law of any jurisdiction except (i) an offence for which liability is capable of being discharged by payment of a fixed penalty; and (ii) an offence which has as its main ingredient the unlawful parking of a vehicle. All convictions which are not spent within the meaning of the Rehabilitation of Offenders Act 1974 must be declared. Further all convictions required to be disclosed by the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 must be declared, even if spent*.* Further Information on this can be found here: https://www.barstandardsboard.org.uk/qualifying-as-a-barrister/bar-professional-training-course/how-to-apply-for-the-bptc/joining-an-inn/ [↑](#footnote-ref-2)
3. Proceedings are pending if (i) you are currently charged with, or (ii) you are on bail or in detention or custody (or have failed to surrender to custody) in connection with, any criminal offence. [↑](#footnote-ref-3)
4. If you were found guilty, but subsequently successfully appealed against that finding, there is no need to declare it. [↑](#footnote-ref-4)
5. For this purpose a “bankruptcy order” includes a bankruptcy order made pursuant to the Insolvency Act 1986 and any similar order made in any jurisdiction in the world. [↑](#footnote-ref-5)
6. For this purpose, a “debt relief order” includes a debt relief order made pursuant to the Insolvency Act 1986 and any similar order made in any jurisdiction in the world. [↑](#footnote-ref-6)
7. For this purpose, a “directors disqualification order” includes a disqualification order made by a court, or disqualification undertaking accepted by the Secretary of State, pursuant to the Company Directors Disqualification Act 1986 and any similar order or undertaking made or given in any jurisdiction in the world. [↑](#footnote-ref-7)
8. For this purpose, a “bankruptcy restrictions order” includes a bankruptcy restrictions order made by a court or a bankruptcy restrictions undertaking accepted pursuant to the Insolvency Act 1986 and any similar order or undertaking made or given in any jurisdiction in the world. [↑](#footnote-ref-8)
9. If you are a disabled person within the meaning of the Equality Act 2010 and are unable to make this declaration, then on application to the Inn consideration will be given as to whether reasonable adjustments can be made. [↑](#footnote-ref-9)
10. This includes any incident or behaviour which if known to the Inn might cause your application to be considered more carefully. If in doubt, disclose the incident/behaviour. Two examples are given by way of illustration but not as limitations on disclosure:

a. Receipt of a police caution.

b. A Court injunction or Anti-Social Behaviour Order restricting your conduct. [↑](#footnote-ref-10)
11. Copies of the Disciplinary Rules and other regulations of the Inn are available for inspection in the Treasury Office. [↑](#footnote-ref-11)
12. The maker of the certificate must be a professional person or person of standing in the community. [↑](#footnote-ref-12)
13. Please give your work address and the name of the organisation (if any) by which you are employed. [↑](#footnote-ref-13)
14. The maker of the certificate must be a professional person or person of standing in the community. [↑](#footnote-ref-14)
15. Please give your work address and the name of the organisation (if any) by which you are employed. [↑](#footnote-ref-15)