

1st Floor, Liberty House 21 Aurora Drive Umhlanga Ridge 4301 Tel: 031 535 7108 Fax: 0865174789

E-mail: info@nationalbarcouncil.co.za

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OUR REF: NBCSA/ADMIN AUGUST 2020

## **APPLICATION FOR NBCSA PUPILLAGE**

(For all applicants who have already been admitted as an advocate.)

This form is for advocates who belonged to a Bar Association. We require proof in this connection to exempt you from having to do our pupillage course. In order for us to assess your application, we need the following documents to be emailed, attachments to be in pdf format, please:

- 1. Completed application forms
- 2. Certified copy of your admission as an Advocate;
- 3. Proof of being admitted to an Association of Advocates.
- 4. Completed Debit Order Instruction form; all fees are to be paid by monthly debit order should your membership application be accepted. Membership fees will be calculated on a pro-rata basis for the current financial year (1 January 2020 to 31 December 2020).
- 5. Copy of updated CV
- 6. Letter of good standing from the LPC.

NOTE: ALL FORMS TO BE SUBMITTED IN PDF OR WORD FORMAT. NO OTHER FORMAT WILL BE ACCEPTED.

NO APPLICATION WILL BE LOOKED AT IF THE APPLICATION FORMS ARE NOT COMPLETED CORRECTLY

Yours faithfully

ADV EM. BASSON

CHAIRPERSON - MEMBERSHIP COMMITTEE

National Executive Membership Committee:

## **NATIONAL BAR COUNCIL OF SOUTH AFRICA**

## MEMBERSHIP APPLICATION FORM NOTE: FOR ADMITTED ADVOCATES, WE RESERVE THE RIGHT TO ASK YOU TO DO PUPILLAGE.

PART "A"	
SURNAME	:
FULL NAM	ES:
POSTAL A	DDRESS:
PRACTICE	ADDRESS:
RESIDENT	TAL ADDRESS:
	IN WHICH YOU PRACTICE / INTEND ON PRACTICING:
DATE ADM	IITTED AS ADVOCATE (attach proof)
CURRENT	OCCUPATION:
in full time	practice
other	······································
	SED FIELDS:
TEL. (W):	
TEL. (H):	
FAX:	
E-MAIL:	
FAMILY M	EMBER INFO: NAME:
TEL. (W):	
TEL. (H):	
CELL:	

FAX:
E-MAIL:
FRIEND INFO: NAME:
TEL. (W):
TEL. (H):
CELL:
FAX:
E-MAIL:
PART B
WRITE A SHORT NOTE ABOUT YOURSELF FOR OUR WEB (NOT COMPULSARY)
(If you want your details on our web, then you might consider sending a digital/electronical photo)
PART C
CONTINUED EDUCATION NEEDS
DO YOU HAVE ANY SPECIFIC NEEDS AT THIS STAGE?
ARE YOU APPLYING TO DO PUPILLAGE OR TO BE EXEMPTED FROM DOING PUPILLAGE?
IF YOU WANT TO BE EXEMPTED, INDICATE THE REASONS (For example, did LEAD course,
was at another Bar, was an attorney etc)
PART D
PERSONAL INFORMATION
DATE OF BIRTH:
GENDER:
DISABILITIES:
MARRIAGE STATUS:
PART E
ACADEMIC QUALIFICATIONS
Institution where LLB obtained

Other academic qualifications
Other certificates or diplomas
Article ships and/or LEAD courses
Pupillage done:
PART F
LIST ANY PREVIOUS CRIMINAL CONVICTIONS, DISCIPLINARY CONVICTIONS, CIVIL CLAIMS
AGAINST YOU:
LIST ANY PENDING CRIMINAL CONVICTIONS, DISCIPLINARY CONVICTIONS, CIVIL CLAIMS
AGAINST YOU:
PART G
PROVIDE an updated C.V.
DONE AND SIGNED ATON THIS THEDAY OF2020
Signature: