

## Application form: Tenancy

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Before completing this application form please check that you have the following information:

- The person specification and role description (if applicable)
- The Outer Temple Chambers equality and diversity statement

Your application form is the first stage of our recruitment procedure. It is the only basis on which we can short-list for interview. You need to complete this form with as much relevant information as possible.

You do not need to send a covering letter or CV with this application form and any we do receive will not be considered.

Part 1 will be separated from the rest of your application (which will be given a reference number) for the short-listing process. The Equality and Diversity Monitoring Form (Part 3) will also be kept separate from your application when we receive it and filed for monitoring purposes. Please ensure that your name is not included on these particular pages.

We welcome applications from all sections of the community and experienced solicitors or academics who wish to transfer to the Bar.

If you have a disability and you would like to discuss your situation in confidence please contact Mrs Asia Gibbs, HR & Regulatory Manager, on 020 7353 6381. This will not affect your application.

Candidates under consideration for tenancy will, following interview, be asked to provide details of fees billed and paid, and diary and aged debt records to support their application.

All applications will be treated in the strictest confidence.

Further information about Outer Temple Chambers can be found on our website: [www.outertemple.com](http://www.outertemple.com).

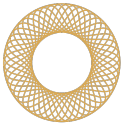
Please send your application to: Asia Gibbs, Outer Temple Chambers, The Outer Temple, 222 Strand, London WC2R 1BA. DX: 351 London. E: [asia.gibbs@outertemple.com](mailto:asia.gibbs@outertemple.com).

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### **Data Protection Act 2018**

*If you submit an application for tenancy, we will record and use the information which you provide for the purpose of dealing with your application and, if the application is successful, for establishing your personnel record. The information will not be kept any longer than is necessary for these purposes. For more information please see our Privacy Policy (supplied with this application form).*

*Personal data provided in the Equality & Diversity Monitoring Form will be recorded and used for the purpose of monitoring our Equality & Diversity Policy, and for statistical purposes.*



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**Outer Temple Chambers**

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**Reference (for OTC use)**

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**PART 1**

**Personal Details**

Name (please write clearly): \_\_\_\_\_

Address: \_\_\_\_\_

Telephone No. \_\_\_\_\_ Mobile No. \_\_\_\_\_

Personal email: \_\_\_\_\_

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Please state which tenancy vacancy you are applying for:

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**References**

During our recruitment process, you may be asked to supply the names and addresses of two people who can confirm your employment or practice record. No referees will be contacted without your prior agreement.

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**Disciplinary Action**

Do you have any outstanding professional complaint against you? **Yes / No** \_\_\_\_\_

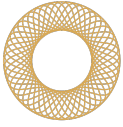
If **Yes**, please give details without breaching confidentiality:

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**Guaranteed Interview Scheme – Disability Confident Employer**

We welcome applications from all sections of our community. Under our participation in the Government’s Disability Confident scheme, we guarantee to interview any candidate with a disability who meets the essential criteria for a vacancy set out in the Vacancy Description and/or Person Specification. Please indicate below whether you wish your application to be considered under the terms of the scheme. If you do, please also complete and submit the Declaration Form at the end of this application form.

Yes / No (please delete as appropriate) \_\_\_\_\_



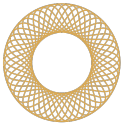
**Outer Temple**

**Declaration**

I declare that to the best of my knowledge the information provided on this form is correct.

I understand and accept that the information I have provided may be used in accordance with Chambers' Privacy Policy (a copy of which has been made available to me) and in particular that checks may be carried out to verify the contents of my application form.

Signature \_\_\_\_\_ Date \_\_\_\_\_



**PART 2**

**Education, Training & Achievements**

**Ref:**

**Further Education**

Subject	Qualification Achieved	Grade / Level

**Other qualifications, skills, awards, noteworthy cases, publications, volunteering**

**Professional membership/ appointments**

**Work experience**

**Ref:**

**Present Chambers or Employer**

Name and address: \_\_\_\_\_

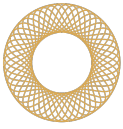
Job title (if appropriate): \_\_\_\_\_

Date started: \_\_\_\_\_

Brief description of areas of work:

**Previous Chambers and/or Employment (please put most recent first)**

Dates	Employer / Chambers	Position / Job Title (If appropriate)




**Pupillage (if appropriate)**

1 <sup>st</sup> / 2 <sup>nd</sup> / 3 <sup>rd</sup> Six	Dates	Chambers & Supervisors

**Experience and relevant skills**

**Ref:**

Please state how your skills and experience make you a suitable candidate for this vacancy.

**DISABILITY CONFIDENT – DECLARATION FORM**

Applicants to Outer Temple Chambers ('OTC') can ask for their application to be considered under the rubric of the *Disability Confident* scheme.

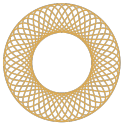
If you wish your application to be considered under this scheme, you need to have completed the main OTC application form, indicating there your wish to be considered under the scheme. Please also fill in and sign this Declaration Form, returning it with your application form by the vacancy closing date.

Information supplied under this scheme will be treated in confidence and only shared on a restricted basis with Outer Temple personnel on a strict 'need to know' basis in accordance with our Privacy Policy (a copy of which is supplied with this form).

**DECLARATION**

I consider myself to have a disability\*\* and I would like to apply for this vacancy under the rubric of OTC's participation in the *Disability Confident* scheme.

I require the following special arrangements to be made for me to be able to attend an interview/assessment



# Outer Temple

(if applicable):

I understand that any false declaration of disability will subsequently invalidate any offer of interview or employment offer.

First Name \_\_\_\_\_ Last Name (Family name) \_\_\_\_\_

Date \_\_\_\_\_

Signature \_\_\_\_\_

\*\* You must have – or have had in the last twelve months – a physical or mental impairment which has a substantial long-term adverse effect on your ability to carry out normal day-to-day activities. This includes those whose disability has lasted, or is likely to last, for twelve months, or if the disability or condition is likely to progress or recur. You are also automatically eligible if you are affected by cancer, HIV, Multiple Sclerosis, or severe facial disfigurement. You do not have to be registered as a disabled person to apply under this scheme.