



27 New Walk, Leicester, LE1 6TE

Overseas Unfunded Placement application form

Please complete in black ink

Full name:	
Address:	
Home Tel Number:	
Mobile Telephone:	
Date of birth:	
Email:	
Inn:	
Date of call:	
Next of kin:	
Name:	
Address:	
Home Tel Number:	
Mobile Telephone:	

Any gaps between employment/education periods should be explained.

Education (Please complete chronologically with your secondary school first)

1. Name and Address			
From		To:	
Qualifications and Grades			
Date passed			

2. Name and Address			
From		To:	
Qualifications and Grades			
Date passed			

3. Name and Address			
From		To:	
Qualifications and Grades			
Date passed			

4. Name and Address			
From		To:	
Qualifications and Grades			
Date passed			

5. Name and Address			
From		To:	
Qualifications and Grades			
Date passed			

Mini- pupillage/marshalling/mooting or other relevant experience. (Please complete chronologically – earliest first)	
1	
2	
3	
4	
5	
6	

Employment history (Please complete chronologically – earliest first):

1. Name and Address of Employer			
Post held and duties			
From		To:	
Reason for leaving:			

2. Name and Address of Employer			
Post held and duties			
From		To:	
Reason for leaving:			

3. Name and Address of Employer			
Post held and duties			
From		To:	
Reason for leaving:			

4. Name and Address of Employer			
Post held and duties			
From		To:	
Reason for leaving:			

5. Name and Address of Employer			
Post held and duties			
From		To:	
Reason for leaving:			

Awards	
Published articles	

Languages with level of proficiency	
Skills	
Computer experience (packages)	
Interests	
Other / miscellaneous	

References

1

2

3

4

If you do not want the above contacted without your permission then please tick here: _____

Chambers operates an equal opportunities policy

To be completed by applicant:

Name of applicant.....

Your
address.....
.....

To be completed by Chambers:

Date received..... Signed by.....

I (full name)

do agree that I will, at all times, both during and after my period of
mini-pupillage/ work experience (delete as appropriate) strictly
observe clients confidentiality and will not divulge or reveal the
names of clients, or the nature and details of their cases without
due
authorisation.

Signed: ...

Print name:

Date:.....