

Application

The Law Society
of British Columbia



Reinstatement of Membership

845 Cambie Street, Vancouver, BC, Canada V6B 4Z9
t 604.669.2533 | BC toll-free 1.800.903.5300
Membership 604.605.5311 | f 604.687.0135
TTY 604.443.5700
Email memberinfo@lsbc.org | lawsociety.bc.ca

Complete this application fully and precisely; omissions or inaccuracies will delay your reinstatement. If the space provided for any answer is insufficient, complete your answer on a separate sheet. Sign and date the sheet and staple it to this form.

Please review eligibility requirements before completing or filing this form.

PART A: Name and identification		
1. Given Name(s)		Surname
2. Have you ever used a name other than the above, formally or informally? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If "yes," list all the names you have used (last, first, middle) and indicate when you used them:		<i>Please tape a 2" x 2" passport-type photo of yourself taken within three months of the date of this application.</i> <i>In the space provided below, write the date on which the photo was taken.</i>
Name	When used	
If the change in name was made by court order, attach a certified copy of the order.		Date of photo _____
PART B: Contact information		
1. Current address		
Street		City
Province/State	Country	Postal/ZIP code
Telephone	Fax	Email
2. Using Schedule 1, list all your former addresses since you ceased to be a member of the Law Society of British Columbia. Start with the most recent.		
PART C: Professional history and experience		
1. Date of call and admission in British Columbia		
2. Please indicate when and why you ceased to be a member of the Law Society of British Columbia		
Date	Reason	

3. Date you ceased to practise law in British Columbia

4. Using Schedule 2, list all your full-time and part-time employment, including any period of unemployment, since you ceased to be a member of the Law Society of British Columbia. Start with the most recent and account for the entire time.

5. Date you last engaged in the full-time active practice of law

6. List in chronological order all the law societies or governing bodies of which you became a member since ceasing to be a member of the Law Society of British Columbia. Start with the most recent.

Date of admission (YYYY/MM/DD)	Society and jurisdiction	Status (e.g., active, retired, non-practising, honorary)	Date of cessation (if applicable)

Please obtain and attach a current certificate of standing from each law society or governing legal body of which you are or have been a member.

PART D: Good character

If you answer “**yes**” to any of the questions in this part, provide full particulars, relevant court documents, reports from your law society, etc. Since ceasing to be a member of the Law Society of British Columbia:

1. Have you ever been charged in Canada or elsewhere with any crime, offence or delinquency under a statute or ordinance, excluding parking or speeding tickets if you have received fewer than five such tickets in the last three years? Yes No
2. Have you been refused admission to or been disciplined, disbarred or struck from membership by a law society or other professional organization? Yes No
3. Have you resigned from a law society or other governing body in exchange for not having disciplinary proceedings taken against you? Yes No
4. Do you know of any complaint or charge pending against you in your professional capacity that has not yet come to the attention of your law society or governing body? Yes No
5. Have you been the subject of an insurance claim under a professional liability insurance policy? Yes No
6. Have you, or has any company or partnership of which you are or were a director, officer or employee, ever:
 - (a) made an assignment under the *Bankruptcy and Insolvency Act*? Yes No
 - (b) had a petition for a receiving order filed against you or it under the *Bankruptcy and Insolvency Act*? Yes No
 - (c) lodged a proposal under the *Bankruptcy and Insolvency Act*? Yes No
 - (d) applied for a consolidation order under the *Bankruptcy and Insolvency Act*? Yes No
 - (e) used the provisions of any federal or provincial legislation to seek a compromise of or delay in the payment of your or its debts? Yes No
7. Have you been a defendant in any civil action in which allegations of fraud, theft or misrepresentation were made against you? Yes No
8. Is there a civil action or a civil judgment outstanding against you? Yes No
9. Have you failed to obey a court order? Yes No

PART D: Good character (continued)

10. Have you been imprisoned for failing to obey a court order? Yes No

11. Have you been denied, or had revoked, a licence or permit whose procurement required proof of good character? Yes No

PART E: Practice in British Columbia

1. If reinstated in British Columbia, do you intend to practise law here? Yes No

If "yes," provide the following information:

Date you will begin practicing

Name of law firm/employer

Street	City
---------------	-------------

Province/State	Country	Postal/ZIP code
-----------------------	----------------	------------------------

Telephone	Fax	Email
------------------	------------	--------------

Contact person

If "no," state your reasons for requesting reinstatement in British Columbia:

PART F: Declaration of applicant

I, _____, do solemnly declare that:

1. I am the applicant described in this application for reinstatement;
2. I have personal knowledge of the information I have provided in this application;
3. the information is true, accurate and complete.

I make this solemn declaration conscientiously believing it to be true and knowing that it has the same legal force and effect as if made under oath.

Declared before me at the _____ of)
 _____ in the Province of)
 _____, this ____ day of)
 _____, _____:)
 _____)
 _____)
 _____)

Notary public in and for the Province of _____,
or a commissioner for taking affidavits for _____.

Signature of applicant

PART G: Applicant's authorization and undertaking

I, _____, the applicant in this application for reinstatement:

1. grant to the Law Society of British Columbia permission to ask any person, government, educational institution, police force, military authority, governing body or other organization about anything relevant to my application for reinstatement in the Law Society of British Columbia;
2. authorize any person, government, educational institution, police force, military authority, governing body or other organization enquired of under this authorization to provide to the Law Society of British Columbia all information or documents requested by that Society;
3. undertake that, if reinstated to membership in the Law Society of British Columbia, I will comply with the *Legal Profession Act*, the Law Society Rules and the *Code of Professional Conduct for BC*.

Date

Signature of applicant

The information in this form is collected under Law Society Rule 2-85(1). The information provided will be used to process your application for reinstatement. If you have any questions about the collection and use of this information, contact a Member Services Representative at the Law Society of British Columbia.

SCHEDULE 1: Previous addresses

List all your former home addresses since you ceased to be a member of the Law Society of British Columbia. Start with the most recent. Account for the entire period.

FROM YYYY/MM	TO YYYY/MM	Street	City	Province/State	Country	Postal/ZIP code

SCHEDULE 2: Employment

List all your full-time and part-time employment since you ceased to be a member of the Law Society of British Columbia. Start with the most recent and account for the entire time, including any periods of unemployment.

FROM YYYY/MM	TO YYYY/MM	Employer	Address	Telephone	Position	Name of supervisor	Reason for leaving

_____ **Date**

_____ **Signature of applicant**

Schedule A

MEDICAL FITNESS

Must be completed legibly and is to be signed by the applicant only.

Section 19 of the *Legal Profession Act* requires that each applicant for articles, call or admission, transfer or reinstatement satisfy the Benchers that he or she is a person of good character and repute and is fit to become a barrister and solicitor.

In asking the questions in this Schedule, the Benchers are seeking information that will help them assess medical fitness to practice competently. Information with respect to practice standards and a competency profile outlining the knowledge, skills and behaviours expected of entry level lawyers is available on the Law Society's website at lawsociety.bc.ca.

The practice of law is often rigorous, demanding a high level of functioning. Any medical condition that would render you incapable of practicing law competently puts clients' interests at risks and harms the profession's reputation. However, the Benchers recognize that everyone experiences pressures in life and responds to those pressures differently. You may be quite capable of practicing law competently in spite of a medical condition.

It is the Benchers' responsibility as the governing body of the profession to determine if an applicant has an impairment that effectively disables that individual from carrying out the functions normally required of a lawyer. Accordingly, the Benchers are not looking for information about past conditions that have been resolved and are not currently affecting your ability to function as a lawyer. You need only report current conditions that could impair your ability to perform the duties of a lawyer.

The fact that you may have sought professional assistance for a problem is not a bar to enrolment. In most cases, evidence of having sought professional assistance is positive evidence as it suggests that you are actively seeking to deal with a problem and taking control of your life.

On behalf of the Law Society, the Lawyers Assistance Program and LifeWorks Canada provide confidential counseling and referral services to lawyers and articulated students and their families who suffer from alcohol or chemical dependencies, stress, depression or other personal problems. Although funded by the Law Society, these programs are entirely independent and their services confidential. The Law Society actively encourages individuals to seek the education and assistance they need. The Lawyers Assistance Program can be contacted at: 1.888.685.2171 and LifeWorks Canada at 1.888.307.0590.

In order to protect your right to privacy, the information you provide relating to this application will be held in confidence and will only be provided to the Credentials Committee where it is deemed relevant to a concern regarding your fitness to practice law and only after you have been notified of the information to be provided to the Committee.

If you answer yes to the questions below, you may be asked to provide further information from a source that the Law Society deems appropriate.

If you would like to discuss a personal concern confidentially, please contact a Bencher or the Manager of Credentials and Licensing.

1. **Given Name(s)** _____ **Surname** _____
2. a) Based on your personal history, your current circumstances or any professional opinion or advice you have received, do you have a substance use disorder¹? Yes No
- b) Have you been counseled or received treatment for a substance use disorder? Yes No
3. ***If you answered yes to questions 2 (a) or (b), please provide a general description on a separate sheet.***
4. Based on your personal history, your current circumstances or any professional opinion or advice you have received, do you have any existing condition that is reasonably likely to impair your ability to function as a lawyer? Yes No
5. ***If the answer to question 4 is “yes”, please provide a general description of the impairment on a separate sheet.***

Date

Signature of applicant

¹Substance Use Disorder includes alcohol or drug abuse or dependence (for more exact diagnostic criteria for substance use disorders, refer to DSM-IV-TR-American Psychiatric Association 2000. Diagnostic and Statistical manual of Mental Disorders: 4th Edition, Text Revision. Washington, DC)