

2. **OPTIONAL** if you do now wish to provide information under “Part C (1) – Public information”

Name	
Street/ P.O. Box	
City	Province/Territory
Postal Code	Telephone
Email	

PART C: PUBLIC PROFESSIONAL INFORMATION

1. Current employer

Name	
Street/ P.O. Box	
City	Province/Territory
Postal code	Telephone
Email	

2. (1) List chronologically all of the law societies or governing bodied of which you are or have been a member.

Date of Admission (YYYY/MM)	Society/Jurisdiction	Status (Active, Inactive, Retired, Honorary, Resigned)	Date of resignation (If applicable)

For Section 3.

Please answer the following questions. If not applicable to you, check not applicable.
If questions are applicable to you, please provide us with an explanation in the space provided.

3. (a) Within this past year, I have disciplinary proceedings pending or that have been taken against me, or complaints made against me as a member of the societies or bodies listed in subsection(2)

N/A | _____
| _____
| _____

The results of any disciplinary proceedings taken against me were:

N/A | _____
| _____
| _____

(b) Within this past year, claims for lawyer’s professional liability insurance are pending or have been made against me as a member of the societies or bodies listed in subsection (2).

N/A | _____
| _____
| _____

(c) The results of any claims for lawyer’s professional liability insurance made against me were:

N/A | _____
| _____
| _____

COMPULSORY PROFESSIONAL DEVELOPMENT (CPD)

I have completed 12 hours of professional development, including my 1 hour of Ethics and Professional Responsibility.

Please complete the following:

Title	Hours	Date	Location

- I am newly called to the LSN (Transfer by December 31, 2019) but was NOT a former student-at-law.

Date of Call

- I have completed 1 hour of professional development for each month since my date of call. I undertake with the Law Society of Nunavut that I will upon request, provide proof of participation.

LAWYER REFERRAL SERVICE FORM

- I do not wish to participate, or I am an employee and do not provide legal services to the public.

AREAS OF PRACTICE

<input type="checkbox"/> Aboriginal Law <input type="checkbox"/> Arbitration / Mediation <input type="checkbox"/> Civil Courts Actions <input type="checkbox"/> Contracts <input type="checkbox"/> Defamation <input type="checkbox"/> Environmental <input type="checkbox"/> Harassment <input type="checkbox"/> Intellectual Property <input type="checkbox"/> Medical Malpractice <input type="checkbox"/> Policy Development <input type="checkbox"/> Residential Schools <input type="checkbox"/> Youth Court	<input type="checkbox"/> Administrative Law <input type="checkbox"/> Boards <input type="checkbox"/> Commercial / Corporate <input type="checkbox"/> Corporate Law / Non-Profit <input type="checkbox"/> Employment (Labor) <input type="checkbox"/> Family <input type="checkbox"/> Human Rights <input type="checkbox"/> Landlord & Tenant <input type="checkbox"/> Municipal <input type="checkbox"/> Property <input type="checkbox"/> Wills/Estate/Trusts	<input type="checkbox"/> Adoption <input type="checkbox"/> Child Protection / Welfare <input type="checkbox"/> Construction <input type="checkbox"/> Criminal <input type="checkbox"/> Employment (Management Only) <input type="checkbox"/> Foreclosure <input type="checkbox"/> Immigration <input type="checkbox"/> Legislation <input type="checkbox"/> Real Estate <input type="checkbox"/> Workers Compensation
Others: <input style="width: 780px;" type="text"/>		

INSURANCE EXEMPTION CERTIFICATE AND UNDERTAKING

- Insurance Exemption Certificate and Undertaking – Jurisdiction: _____

PAYMENT INFORMATION

The prescribe annual fee including applicable taxes (5% GST) was paid by:

Cheque

- A cheque payable to the “Law Society of Nunavut” in the amount of \$ _____ and cheque # _____

Electronic Money Transfer (EMT)

An Electronic Money Transfer (EMT) to administrator@lawsociety.nu.ca in the amount of _____ on the date _____.

In-person direct deposit

In-person direct deposit to RBC Transit #09851-033 Acct# 101-466-1 in the amount of _____ on the date of _____.

Employer to pay

Employer to pay for my renewal fees and levies

PART D: DECLARATION OF APPLICANT AND AUTHORIZATION

1. I certify that the information I have provided in or annexed to this application is correct.
2. I undertake with the Law Society of Nunavut that I will, during my enrollment well and faithfully keep and perform all my obligations as a barrister and solicitor and as a member of the Society and abide by the Legal Profession Act, the Rules of the Law Society of Nunavut and any other requirements of the Society.
3. I acknowledge, pursuant to subsection 14(3) of the Legal Profession Act that the Law Society of Nunavut may disclose: my name, membership status, the name of my employer and any information regarding any findings of guilt for conduct discerning of discipline and any sanctions imposed; by making it available on the Law Society of Nunavut’s website and in response to direct requests from the public.
4. I DO / DO NOT authorize the Law Society of Nunavut to provide my business address and contact information by making it available on the Law Society of Nunavut’s website, in a public membership directory, or in response to direct requests from the public.
5. I DO / DO NOT consent to the Law Society of Nunavut sending me commercial electronic messages regarding upcoming professional development activities, consultations, and events, either on its own behalf, or on behalf of other organizations. I acknowledge that not all communications from the Law Society of Nunavut are commercial in nature, and that I will continue to receive official notices in accordance with the Legal Profession Act and the Rules of the Law Society of Nunavut.

Dated at: _____ On this _____ day of _____, _____

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(Signature of applicant)

