

Application No.	
(internal use only)	

## Mini-Pupillage Application Form

When you anticipate being in a position to commence pupillage  Whether you anticipate obtaining any exemption from the BSB from the requirement to undertake a 12-month pupillage, and if so please provide details.	CONTACT INFORMATION	
Telephone (Mobile)  Email  PUPILLAGE START DATE AND EXEMPTIONS  Please indicate:  When you anticipate being in a position to commence pupillage  Whether you anticipate obtaining any exemption from the BSB from the requirement to undertake a 12-month pupillage, and if so please provide details.  Please note that we are only currently processing applications for those who intend to	Prefix First Name	Last Name
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apply for a 12-month pupillage via Pupillage Gateway commencing September 2027.	Whether you anticipate obtaining ar	ny exemption from the BSB from the requirement to undertake a
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ABILITY TO WORK IN THE UK
Are there any restrictions on your ability to work in the UK?
If you do not have the permanent, unrestricted right to work in the UK, you should answer Yes to this question. Restrictions on your right to work in the UK may include any fixed-term visa.  If you have answered Yes to this question, please provide details of the restriction and upload the necessary documents to this application.



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EDUCATION
A Level or equivalent and university transcripts to be appended to your application.
Schools or colleges attended with dates.
GCSEs or equivalent (date; subject; grade)
A Levels or equivalent (date; subject; grade)
University attended and title of course (dates)



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Have you completed your degree? Yes No
If yes, please provide your final grade, a breakdown of results and position in year (available from university)
If no, please provide full details of all your course results to date (date; nature of qualification; grade)
Other post-graduate qualifications including GDL and BPTC (date; institution; nature of qualification; grade)
Individual subjects studied as part of GDL (subject; date; grade)



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OTHER RELEVANT INFORMATION
Membership of an Inn of Court (Inn, membership number and date from).
Please set out any other indication of exceptional academic ability (e.g.scholarlarships, awards, prizes) and dates.
Mini-Pupillages undertaken (date; Chambers; short description of work experience).
Other relevant work experience (e.g. Dates; employers and brief detail).
Other relevant experience (in particular any other evidence of your advocacy skills).



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APPLICATION QUESTIONNAIRE
Please answer the following questions.
Summarise a case which you think was wrongly decided and explain your reasoning. (400 words)
Please provide an example of an occasion on which you tried to change someone's mind about something. Please briefly explain the situation, what you did/said, and the result that it had. (300 words)
What recent development in one of Chambers' core practice areas have you found interesting and why? (300 words)
If there is anything else that you would like to tell us about your application, or if there are any mitigating/extenuating circumstances, please tell us here. We are committed to recruiting the best possible pupils from all backgrounds and groups across society, including those who are traditionally underrepresented at the bar. (150 words)



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## **REFERENCES**

Confirmation

Date

Please give details of two referees whom we may contact. One should be an academic referee who will be able to speak in detail as to your academic ability (not necessarily in law if your academic career to date has principally been in another subject). The other should be a professional or further academic referee. Any personal referees should be able to speak from a good level of personal experience of you but should not be a family member. We do not require you to append references to your application.

Name	Email
Address	Experience of you
Post Code	
Name	Email
Address	Experience of you
Post Code	
DECLARATION AND DATA DEGLECTIO	A L By completing the tick hav below:
DECLARATION AND DATA PROTECTIO	
As part of your application for mini-pupillage, we	<ul> <li>I confirm that I consent to the processing of my personal data;</li> </ul>
will process personal data about you as necessary.  By making an application for mini-pupillage you	I confirm the contents of this form are true and
consent to the processing of your personal data	<ul><li>accurate;</li><li>I confirm that I wish to apply for mini – pupillage</li></ul>
under the provisions of the Data Protection Act 2018 in accordance with Brick Court Chambers	<ul><li>at Brick Court Chambers; and</li><li>I confirm that my application is my sole creation</li></ul>
Privacy Notice (which can be accessed <u>here</u> ).	and original work and I have not used any
	Generative AI programmes, including LLM programmes such as ChatGPT.



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## Equality And Diversity Monitoring Form

Strictly Private and Confidential

Brick Court Chambers is committed to equality of opportunity. All applications are considered on an equal basis, in accordance with all applicable equal opportunities legislation. In order to monitor the effectiveness of our equal opportunities policy and to assist us in meeting our statutory duties under the Equality Act 2010, we request all applicants to provide the information indicated below. This information will only be used for monitoring and statistical analysis and will not be used as part of the selection process. Your diversity data will be treated as confidential and stored securely. It will not be published in a way that might identify any individual and will not be disclosed to third parties.  Please select one response to each question below.	
Gender	
Male Prefer not to say	
Female	
Is your gender identity the same as your sex registered at birth?	
Yes If no, please enter gender identity	
No	
Prefer not to say	
What is your sexual orientation?	
Bisexual Heterosexual/straight	
Gay man I use a different term	
Gay woman/Lesbian Prefer not to say	
ETHNICITY: Please indicate your ethnic group	
White	
English/Welsh/Scottish/Northern Irish/British Any other White Background, please enter -	
Irish	
Gypsy or Irish Traveller	
Roma	

## BRICK COURT

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Mixed/Multiple Ethnic Groups	
White and Black Caribbean	Any other Mixed or Multiple ethnic background, please enter -
White and Black African	
White and Asian	
Prefer not to say	
Asian/Asian British	
Asian Indian	Any other Asian Background, please enter -
Asian Pakistani	
Asian Bangladeshi	
Chinese	
Black/African/Caribbean/Black British	
Black African	Any other Black background, please enter -
Black Caribbean	
Other Ethnic Group	
Arab	Any other ethnic group, please enter –
Prefer not to say	
Religion/Belief	
Buddhist	Sikh
Christian (all denominations)	Agnostic
Hindu	Any other religion or belief
Jewish	No religion
Muslim	Prefer not to say



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DISABILITY		
Disability is defined by relevant legislation as a physical or mental impairment which has a substantial and long-term effect on a person's ability to carry out normal day-to-day activities.		
Do you consider yourself to have a disability?		
Yes - please specify the nature of your disability -	No	
	Prefer not to say	
Are your day to day activities limited because of a he expected to last, at least 12 months?	ealth problem or disability which has lasted, or is	
Yes	Prefer not to say	
No		
Age Group		
Under 25	55-64	
25-34	65+	
35-44	Prefer not to say	
45-54		
SCHOOL BACKGROUND		
Did you mainly attend a state or fee-paying school k	petween the ages of 11-18?	
UK non-selective state school (e.g. comprehensive)		
UK selective state school (e.g. grammar school)		
UK fee-paying school (private, independent)		
UK fee-paying school supported by a means-tested bursary/scholarship		
School outside the UK		
Prefer not to say		



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If you finished school after 1980, were you eligible for school years?	free school meals at any point during your
Yes	I don't know
No	Prefer not to say
Not applicable	
PARENTAL EDUCATION	
If you went to university (to study a BA, BSc, or High attended university by the time you were 18?	ner) had either (or both) of your parents or carers
Yes	I didn't attend university
No	Prefer not to say
I don't know	
CARING RESPONSIBILITIES	
Are you a primary carer for a child or children under	18?
Yes	Prefer not to say
No	
Do you look after, or give any help or support to fami of either; long-term physical or mental ill-health/disal anything you do as part of paid employment.)	
No	Yes, 50 or more hours a week
Yes, 1-19 hours a week	Prefer not to say
Yes, 20-49 hours a week	
Please note that we will retain your data for the lengt find our privacy policy <u>here</u> .	ch of time required to process your application. You can