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## TRAINING CONTRACT APPLICATION FORM

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**CONTACT DETAILS**

**TITLE: \_\_\_\_\_\_\_\_\_**

**NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**POSTCODE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**TELEPHONE (HOME): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**TELEPHONE (MOBILE): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**EMAIL ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**EDUCATION**

|  |  |  |  |
| --- | --- | --- | --- |
| **Dates From/to** | **School/College** | **Subject taken** | **Grade** |
|  |  |  |  |

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**UNIVERSITY/PROFESSIONAL QUALIFICATIONS ACHIEVED**

**MEMBERSHIP OF PROFESSIONAL ORGANISATIONS AND INSTITUTES.**

**DATES FROM/TO:**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**RELEVANT EMPLOYMENT (INCLUDING VOLUNTARY WORK)**

**PLEASE START WITH YOUR PRESENT OR LAST EMPLOYER**

|  |  |  |  |
| --- | --- | --- | --- |
| **Dates From/to** | **Name and address of employer** | **Position held and brief description of duties** | **Reason for leaving** |
|  |  |  |  |

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**DO YOU HAVE A CURRENT DRIVING LICENCE? YES/NO**

**HAVE YOU A CAR OR ACCESS TO A CAR FOR BUSINESS USE? YES/NO**

**DO YOU HAVE ANY CRIMINAL CONVICTIONS WHICH ARE NOT YET**

**SPENT UNDER THE REHABILITATION OF OFFENDERS ACT? YES/NO**

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**HOBBIES, INTERESTS & ACHIEVEMENTS**

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**In no more than 250 words, explain why you are applying to train at McKees?**

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**In no more than 250 words, please outline why you want to become a commercial lawyer?**

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**In no more than 250 words, describe a significant challenge you have faced and how you overcame it.**

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**REFERENCES - Give the names and addresses of two persons who will provide any necessary references**

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**I certify that all the information I have given is correct. I understand that any false information given may**

**result in any job offer being withdrawn.**

**Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Please note that if successful you will be required to sign a Standard Disclosure Form to Access NI for**

**disclosure of any criminal record. This information will only be used insofar as it is relevant to the role.**

**Closing date for return of completed applications is 4pm on Friday \*\* January 20\*\***

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