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FOR OFFICE USE ONLY

Application No.: \_\_\_\_\_\_\_\_\_

Date received: \_\_\_\_\_\_\_\_\_

PHOTO

of the applicant

**APPLICATION FOR REGISTRATION AS A REGISTERED LEGAL ADVISER**

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| **PART I. GENERAL INFORMATION** |
| Please provide the following personal data to the AIFC Legal Services Board and the Office of the AIFC Legal Services Board (hereafter “LSB”):   1. Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (e.g. Mr/Mrs/Miss/Ms) 2. Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   *Surname First Name*   1. Date of birth: \_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_   *day month year*   1. Place of birth*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*   *City/State Country*   1. Passport: *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*   *Country / Place of issue Number Date of expiry*   1. Citizenship: *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*   *Country*   1. ID card of the Republic of Kazakhstan No. *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_* (if any) 2. State any changes of name, formal or informal, or other surnames or given names you have used, and when: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   1. Correspondence address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Telephone*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*  *Please enclose a copy of your passport or ID card of the Republic of Kazakhstan (if relevant).* |

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| **PART II. PROFESSIONAL STANDING AND EXPERIENCE** |
| 1. Please indicate a Legal Professional Body[[1]](#footnote-1) of which you are now a member:   *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*  *Name of Legal Professional Body Jurisdiction*   1. Please indicate a law firm or organisation of your present employment:  |  |  |  |  | | --- | --- | --- | --- | | Name of law firm or other employer | Address | Position | The law of the jurisdiction in which you practiced | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  1. Have you ever:  * Had any disciplinary or regulatory findings, sanctions or actions brough against you by a Legal Professional Body (or any court or body hearing appeals in relation to disciplinary or regulatory findings) * Failed to give information to a Legal Professional Body when asked * Given false or misleading information to a Legal Professional Body * Breached a Legal Professional Body’s requirements  |  |  | | --- | --- | | Stop outline Yes | Stop outlineNo |  1. Are you aware of any complaint or charge or disciplinary proceeding pending against you in your professional capacity, which has not yet come to the attention of your Legal Professional Body, which might result in disciplinary action being takin against you?  |  |  | | --- | --- | | Stop outline Yes | Stop outlineNo |      1. Are you currently facing any regulatory or disciplinary proceedings or investigations?  |  |  | | --- | --- | | Stop outline Yes | Stop outlineNo |   *Please enclose a certified copy of your current Practising Certificate and Certificate of Good Standing issued by the relevant Legal Professional Body.* |

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| **PART III. PROFESSIONAL INDEMNITY INSURANCE** |
| 1. Name of Insurer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 2. Address of Insurer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 3. Policy No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 4. Policy Period: From \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.   *Please enclose a documentary evidence that you are insured as set out above for legal services rendered by you while acting as a Legal Adviser in the AIFC.* |

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| **PART IV. PROPRIETY QUESTIONNAIRE** |
| 1. Have you ever been convicted by a court of a criminal offence as follows? The offence:  * meant you were given a custodial or suspended sentence * involved dishonesty, fraud, perjury and/or bribery * was of a violent or sexual nature * was associated with obstructing the course of justice * which demonstrated behaviour showing signs of discrimination towards others * was associated with terrorism  |  |  | | --- | --- | | Stop outline Yes | Stop outlineNo |  1. Have you ever:  * been convicted by a court of more than one criminal offence * accepted a caution * you are currently subject to a conditional discharge or bind over by a court  |  |  | | --- | --- | | Stop outline Yes | Stop outlineNo |  1. Are you currently facing any criminal charges?  |  |  | | --- | --- | | Stop outline Yes | Stop outlineNo |  1. Have you ever:  * been responsible for dishonest, violent, threatening, harassing or discriminatory behaviour * misused your position for (your or anyone else’s) financial gain * misused your position of trust in relation to vulnerable people  |  |  | | --- | --- | | Stop outline Yes | Stop outlineNo |  1. Are you and/or your business:  * included in one or more sanctions lists of international organisations, states? * fall under the sanctions ‘rule of 50%’[[2]](#footnote-2)?  |  |  | | --- | --- | | Stop outline Yes | Stop outlineNo |  1. Do you:  * have any connections with sanctioned persons and/or persons falling under the ‘rule of 50%’? * closely work with sanctioned persons and/or persons falling under the ‘rule of 50%’  |  |  | | --- | --- | | Stop outline Yes | Stop outlineNo |  1. Do you confirm that you will notify the Office of the AIFC Legal Services Board immediately if any representation, undertaking or confirmation contained herein, or any information provided, becomes, or is likely to become untrue or inaccurate in whole or in part, at any time?  |  |  | | --- | --- | | Stop outline Yes | Stop outlineNo | |

**DECLARATION OF APPLICANT**

I, *\_\_\_(full name)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,* DECLARE THAT:

1. I am the individual named on this application.
2. I believe the information in this application is correct.
3. I wish to be registered with the AIFC Legal Services Board as a Registered Legal Adviser to practice the Acting Law of the AIFC in the AIFC and worldwide.
4. I will tell the AIFC Legal Services Board at once if anything changes between now and my registration.
5. I understand that there could be serious consequences if I have knowingly or recklessly given the AIFC Legal Services Board information that is false or misleading (or if I have failed to tell you about any significant information).
6. I understand that the AIFC Legal Services Board may make checks to verify the information I have given.

Place of declaration: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of declaration: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name in full: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PRIVACY NOTICE**

**Processing of your personal data**

The personal data collected in this form will be used by the AIFC Legal Services Board (the LSB) and the Office of the LSB, in accordance with the AIFC Data Protection Regulations and AIFC Data Protection Rules, for the following purposes:

1. the processing of your application for registration as a Registered Legal Adviser;
2. the exercise of the powers of the LSB conferred upon it under the AIFC Legal Services Regulations and the Rules of the LSB;
3. the running of the Roll of Registered Legal Advisers is published at the AIFC official website for the purpose of facilitating the public in identifying Legal Adviser registered with the LSB and in knowing the services they provide.

The LSB and the Office of the LSB, in accordance with the AIFC Data Protection Regulations and AIFC Data Protection Rules, will:

* collect, use, store and share your data in the exercise of its regulatory powers set out in the AIFC Legal Services Regulations 2022 and the Rules of the LSB; and
* protect your personal data ensuring a level of security appropriate to the risks represented by the processing or transfer and the nature of the personal data; and
* share your personal data with third party providers who collect, store and process your personal data on our behalf who are contractually obligated to keep your personal data confidential and subject to appropriate safeguards; and
* transfer your personal data also to jurisdictions outside of AIFC. This may include jurisdictions that are not considered as having adequate level of data protection according to AIFC Data Protection Regulations and Rules.

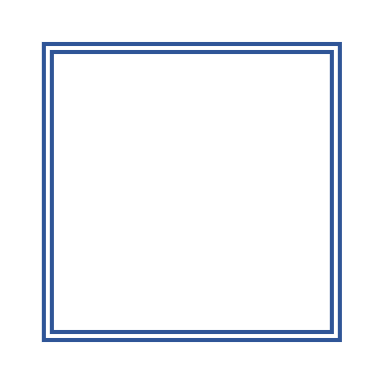
**Your rights**

Under the AIFC Data Protection Regulations and AIFC Data Protection Rules, you have the following rights, in relation to our processing of your personal data:

* right to information about processing of your data and rectification of your data; and
* right to object the processing of your personal data; and
* right to file a complaint with the Commissioner of Data Protection.

**Contact us**

If you have any questions about this Privacy Notice, please contact the Office of the LSB at the following address: Mangilik El ave. 55/17, Astana, the Republic of Kazakhstan, by phone + 7 (7172) 64 73 41, and email at OfficeLSB@aifc.kz.

I hereby consent to the processing of personal data collected by this form by the LSB and by the Office of the LSB.

1. **Legal Professional Body** means a national, regional or state regulatory or professional association, authority, court, governmental department, society or other entity that regulates or licenses lawyers. [↑](#footnote-ref-1)
2. A person whose property and interests in property are blocked by any state’s regulation, sanctions lists is considered to have an interest in the property, and interests in property of any legal person, in which the blocked person owns, controls, directly or indirectly, a 50 percent or greater interest. [↑](#footnote-ref-2)