### APPLICATION FORM



YOU DECIDE BECOME A MAGISTRATE

Ministry of JUSTICE

## Visit a magistrates' court

Before making your application, you must visit a magistrates' court in general session to observe what goes on. You should visit at least once but preferably two or three times.

### When completing this form, please refer to the Application Form Guidance Notes.

If a question does not apply, please mark it N/A (not applicable). Do not leave the space blank or put a line through it.

Please type your answers to the questions into the form fields. These will expand as you type until they fill the box. Please use a font size of 11 to complete your answers.

#### IMPORTANT

You can choose to serve at a magistrates' court near your home or your work address. Please refer to the list of courts and Advisory Committees contained in your application pack or online at www.direct.gov.uk/magistrates.

Please state in the box below the magistrates' court not be vacancies at this court, and if selected you n	
Thor be vacancies at this court, and it selected you in	may be asked to sit at another courty.
Please state in the box below the name of the Advis recruitment to the court you have selected above.	sory Committee which is responsible for

Please note: We cannot process your application without this information.

### Please see opposite page before completing this form.

# SECTION 1 PERSONAL INFORMATION

1.1	Title (please tick one) Mr	☐ Mrs ☐	Miss Ms Ms	Dr Other (specify)	
1.2	Surname				
1.3	Forename(s)				
1.4	Previous surname(s)				
1.5	Home address				
	Post code				
1.6	Telephone number	home			
		daytime			
		mobile			
1.7	E-mail address				
1.8	Date of birth				
1.9	Age				
1.10	How long have you lived in the locality?	less than a year	1-5 years	more than 5 years	
1.11	Are you:	single [ cohabiting [		a civil partner widowed	
1.12	Do you have any children'	? Yes [	□ No □		
	If yes, please give their ag	es			
1.13	Place and country of birth				
1.14	Nationality				
1.15	Educational qualifications	-			<u></u>
		-			
		-			

	I would describe my e	thnic origin as: (ple	ease tick one)		
	White	British (or one	e of the follow	ing)	
		English		Scottish	Welsh
		Other (please :	specify)		
		Irish		)	<del>-</del> 8
		Any other Who background (			
	Mixed	White and Black Caribbe	ean	White and Black African	White and Asian
		Any other mix background (			
	Asian, Asian British,	Asian English, A	Asian Scottis	h, Asian Welsh	
		Indian		Pakistani	Bangladeshi
		Any other Asi background (			
	Black, Black British,	, Black English, I	Black Scottis	h, Black Welsh	
		Caribbean		African	
		Any other Bla			
	Chinese, Chinese Br	itish, Chinese Er	nglish, Chine	se Scottish, Chinese	Welsh
		Any other Ch			
	Any other backgrour	nd (please specify)			
1.17	If you wish to serve in	Wales, do you ha	ve a working	knowledge of the Wel	sh language?
	Oral	Yes	☐ No	Written	☐ Yes ☐ No

1.16 Ethnic origin monitoring.

# SECTION 2 YOUR OCCUPATION

Are you:	☐ Employed	Self-employed	Not in paid employment
	Retired	Other (specify below	N)
the list on pages 0			ccupational group selected from or retired, please indicate what
77.	e Guidance Notes. If you ar		group selected from the list on please indicate which group yo
What is your prese	ent occupation/job title? (If a	pplicable)	
When did you star	t this job?		
	ployer's business (or own i to whom any corresponder		telephone number and the (If applicable)

2.7	Employment history over the past 10 years. Exclude current employment and start with the next most
	recent. Please continue on another sheet and attach, if necessary.

From	То	Occupation	Employer and Address
	-		

Yes	□No
1.200200	
And a second second	ease give details, as appropriate, of your rank, the nature of your duties, the force you work e dates of employment.
TION 3	YOUR SPOUSE/PARTNER/RELATIVES
le vour er	auco/partner in any form of ampleyment?
200	ouse/partner in any form of employment?
Is your sp	ouse/partner in any form of employment?  No Not applicable
☐ Yes	N 10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
☐ Yes	☐ No ☐ Not applicable
☐ Yes	☐ No ☐ Not applicable
Yes  If yes, who have police force	□ No □ Not applicable at is their occupation?  ave any relatives, including a spouse and partner and their close relatives, who are or
Yes  If yes, who have police force	No Not applicable at is their occupation?  ave any relatives, including a spouse and partner and their close relatives, who are or been police officers, special constables, community support officers, civilian employees on the traffic wardens, employees of the Crown Prosecution Service or the Prison Service, or
Do you hawho have police for any other Yes	No Not applicable at is their occupation?  ave any relatives, including a spouse and partner and their close relatives, who are or been police officers, special constables, community support officers, civilian employees on the traffic wardens, employees of the Crown Prosecution Service or the Prison Service, or swhose work requires them to attend court?
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## SECTION 4 CRIMINAL CONVICTIONS OR CIVIL PROCEEDINGS

4.1 Do you have any criminal convictions?

No

Yes

Penalty or order of court	Court	convicti
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Penalty or order of court	Court	Date of adjudica
r	nclude details of any bankruptcy or inst you or in your favour	

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## SECTION 5 REASONS FOR APPLYING TO BECOME A MAGISTRATE

What particula	r qualities do y	ou think you co	ould bring to th	e magistracy	?	
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What particula	r qualities do y	ou think you co	ould bring to th	e magistracy	?	

Yes	☐ No				
f <b>yes</b> , plea	se give details.				
-sc 9	2 5 8			5 0/22	
Please giv	e details of your spa	are time and rec	eational interest	s and activities.	
Please giv	e details of your spa	are time and rec	eational interest	s and activities.	
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If <b>yes</b> , please give de	tails.	
	ve visited a magistrates' court at least once but protes). Give details of the name of the courts and o	
Where did you hear a	bout become a magistrate?	
press advert	☐ leaflet/poster	
_ proce across	A 40 40 40 40 40 40 40 40 40 40 40 40 40	
	word of mouth	
radio advert	AND CONTROL OF THE CO	

## SECTION 6 HEALTH AND DISABILITY

	below.						
D			0				
Do you conside	er that you na No	ve a disability	<b>(</b>				
If yes, please give details.							
TION 7 COO		TED AND F	NECL ADATIO	ON			
TION 7 GOO	DD CHARAC	CTER AND D	DECLARATIO	ON			
Please tick eith	er <b>Yes</b> or <b>no</b>	. You will be a	sked this que		if you are	called for i	nterview.
	er <b>Yes</b> or <b>no</b>	. You will be a	sked this que		if you are	called for i	nterview.
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### SECTION 8 REFEREES

You should give details of three referees who have known you for at least three years (and are not related to you) unless they are acting as a referee in their capacity as an employer. They will be asked to complete a reference form later. (See Guidance Notes, p.07).

EFEREE 1							
Title (please tick one)	Mr 🗌	Mrs	Miss	Ms 🗌	Dr 🗌	Other (specify)	
Name							
Address							
Post code							
Telephone number					=		
Occupation							
E-mail address							
EFEREE 2 Title (please tick one)	Mr 🗌	Mrs	Miss	Ms 🗌	Dr 🗌	Other (specify)	
EFEREE 2 Title (please tick one) Name	Mr 🗌	Mrs	Miss	Ms 🗌	Dr 🗌	Other (specify)	
Title (please tick one)	Mr _	Mrs	Miss	Ms 🗌	Dr 🗌	Other (specify)	
Title (please tick one) Name	Mr _	Mrs	Miss	Ms 🗌	Dr 🗌	Other (specify)	
Title (please tick one)  Name  Address	Mr _	Mrs	Miss	Ms 🗆	Dr _	Other (specify)	
Title (please tick one)  Name  Address  Post code	Mr _	Mrs	Miss	Ms	Dr 🗆	Other (specify)	

REFEREE 3						
Title (please tick one)	Mr 🗌	Mrs	Miss	Ms 🗌	Dr 🗌	Other (specify)
Name						// <del>1</del>
Address						
D-std-						
Post code						
Telephone number						
Occupation						
E-mail address						
	7,					
Under the provisions	s of the Da	ta Protectio	n Act we n	nay not lav	vfully pas	s any details we hold
about you to a third	party witho	out your exp	oress conse	ent. If you	are selec	ted to serve as a magistrate,
한 등 경기 때문에 없는 이 없는 사람들이 없는 것이 되는 사람이 있다면 하다 다 없다.						to send you information
			to contact	you about	training?	Your details will <b>not</b> be
passed to any other	organisati	on.				
I agree to details of	my name,	address, da	ate of birth	and bench	being pa	assed to the Magistrates'
Association if I am a	ppointed a	s a magisti	rate.			
Yes No*						

#### RETURNING THIS FORM

Please return your completed form to your local Advisory Committee. Your local Committee can be found in the list of Advisory Committees and Magistrates' Courts enclosed in the application pack or available on the wesite at: www.direct.gov.uk/magistrates. Please either email the form or send a high quality printed version of it by post – do not return a photocopy of the form.

<sup>\*</sup> If you tick **no**, your details will not be disclosed.