

# Law Society of Yukon

#202 – 302 Steele Street

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## FORM 27

### Application for Reinstatement

To the Executive of the Law Society of Yukon in the matter of an application for reinstatement to the Law Society of Yukon by:

#### Name

Last Name	First Name	Middle Name(s)
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#### Address

Name of Firm/Employer			
Street			
City	Province/Territory	Country	Postal Code
Telephone Work (    ) Home (    )	Fax (    )	E-mail Address	
Date of Birth	Year:	Month:	Day:
Place of Birth:			
STAPLE YOUR PHOTOGRAPH HERE		Attach an unmounted photograph. Photo must be of passport type and taken approximately within one month of this application.	

The Applicant's Questionnaire must be completed legibly. All questions must be answered fully and precisely. Omissions or inaccuracies may be grounds for rejection. If the space for any answer is insufficient, the applicant may complete the answer in full by attaching the same to this application form.

1. Date of prior call and admission in Yukon Territory?

<p>2. Please indicate when and why you ceased to be a member of the Law Society of Yukon? Date:</p> <p>Reason:</p>
<p>3. If reinstated in the Yukon Territory, do you intend to practice law here: <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If “yes”, provide the date you will begin practising.</p> <p>If “no”, state your reasons for requesting reinstatement in the Yukon Territory.</p>
<p>4. I will maintain a clients’ trust account in the Yukon Territory. <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If I have checked “No” and if I do set up a client’s trust account in the Yukon Territory, I will immediately notify the Law Society of Yukon and I will comply with the Rules of the Law Society of Yukon and any other requirements of the Law Society of Yukon.</p>
<p>5. What other name or names (given and surname) if any, have you used?</p>
<p>6. Has your name ever been changed? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If your name has been changed, state particulars (i.e. from what to what, why and when).</p> <p>If the change in your name was made by a Court Order, attach hereto a certified true copy of the Order.</p>
<p>7. Are you a Canadian citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If naturalized, state when and where, number and date of citizenship and Citizenship Court from which issued; and if claiming Canadian Citizenship other than by birth or personal naturalization, state on which basis.</p>
<p>8. State every residence you have had, with addresses and dates over the past 10 years.</p>

9. State the name of every legal or other professional society or body of which you are now or have ever been a member. **You must provide a Certificate of Standing dated within 60 days of the date of application from each Society of which you are or have been a member.**

<u>Name of Jurisdiction</u>	<u>Date of Call and Admission</u>	<u>Are you Currently a Member?</u>	
_____	_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
_____	_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No

10(a). Do you have any claims for lawyer's professional liability insurance pending?  
 Yes  No

10(b). Have any claims ever been made against you as a member of the societies listed above?  
 Yes  No

**If either question is answered in the affirmative, please give details, including dates.**

11. Are you now or have you ever been a Queen's Counsel?  Yes  No

If answered in the affirmative, state the following:

a) Date of Appointment: \_\_\_\_\_

b) Provincial or Federal: \_\_\_\_\_

c) If Provincial, which province: \_\_\_\_\_

12. Since the date of your first call and admission to the practice of law have you at any time not been actively engaged in the practice of law?  Yes  No

If answered in the affirmative, state the following:

a) For what period or periods of time were you not engaged in the active practice of law?

b) For what reason were you not actively engaged in the practice of law?

13. State the name and mailing address of each firm with which you have been associated in any way during the five years immediately preceding the date of this application (if self-employed, give business addresses).

14. Provide names and business addresses of two professional references who are members of each of the professional or legal societies or bodies of which you are now or have ever been a member.

a)

b)

15. Do you have a Canadian common law degree?  Yes  No

Name of University where degree obtained:

16. Have your academic credentials been evaluated by the National Committee on Accreditation?

N/A  Yes

If yes, please attach your National Committee on Accreditation Certificate of Qualification.

17. Have you ever been arrested or charged in respect of any offence?  Yes  No

**If answered in the affirmative, give full details, including dates.**

18. Have you ever been convicted of any offence?  Yes  No

**If answered in the affirmative, give full details, including dates.**

19. Have you:

a) been suspended, disqualified, censured, or had disciplinary action instituted against you as a member of any profession or organization?  Yes  No

b) been denied or had revoked any licence or permit, the procurement of which required proof of good moral character?  Yes  No

c) been charged in any legal proceeding with bankruptcy, insolvency, or filed a voluntary petition in bankruptcy?  Yes  No

d) at any time not obeyed any Order of any Court requiring you to do or abstain from doing any act?  Yes  No

e) been a defendant in any civil action?  Yes  No

f) been refused admittance to any professional body or law society?  Yes  No

**If any of the above questions are answered in the affirmative, give full details, including dates.**

20. Are there at present any civil judgments outstanding against you?  Yes  No

**If answered in the affirmative, give full details.**

21. Are there at present any civil actions pending against you which might result in judgments being filed against you?  Yes  No

**If answered in the affirmative, give full details.**

22. Have you ever been under treatment for any mental illness, or have you been or are you under treatment for alcoholism or the use of drugs?  Yes  No

**If answered in the affirmative, give full details, including dates.**

23. Are you aware of any professional complaint or criminal charge pending against you which might result in any disciplinary or other proceedings being taken against you?  Yes  No

**If answered in the affirmative, give full details.**

**DECLARATION OF APPLICANT**

I, \_\_\_\_\_, do solemnly declare that:

- 1. I am the applicant described in this application;
- 2. I have personal knowledge of the information I have provided in this application;
- 3. the information is true, accurate, and complete; and

I make this solemn declaration conscientiously believing it to be true and knowing that it has the same legal force and effect as if made under oath.

Declared before me at the \_\_\_\_\_ of )  
 \_\_\_\_\_ in the )  
 Province/Territory of \_\_\_\_\_, )  
 this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_. )  
 )  
 )  
 )  
 \_\_\_\_\_ )  
 Notary Public or Commissioner for taking Oaths )  
 in and for the Province/Territory of )  
 \_\_\_\_\_ )

\_\_\_\_\_  
Applicant's Signature

**APPLICANT'S AUTHORIZATION AND UNDERTAKING**

I, \_\_\_\_\_, the applicant in this application for reinstatement:

- 1. grant to the Law Society of Yukon permission to ask any person, government, educational institution, financial institution, police force, military authority, governing body, or other organization about anything relevant to my application for reinstatement to The Law Society of Yukon;
- 2. authorize any person, government, educational institution, financial institution, police force, military authority, governing body, or other organization enquired of under this authorization to provide The Law Society of Yukon all information or documents requested by that Society;
- 3. undertake that, if reinstated to membership in The Law Society of Yukon, I will comply with the *Legal Profession Act*, the Rules of The Law Society of Yukon, and the Code of Professional Conduct.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Applicant