

Application for Training Contract 2010

Please use capital letters when filling in this form.

Return by post to:
Nicholas C J Lakeland
Silverman Sherliker LLP Solicitors
7 Bath Place
London EC2A 3DR

Personal Details

Title	
Surname	
Forename/s	

Address	
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Nationality	
Telephone No.	
Mobile	
Email	

Education

Law School Attended	
GDL Results	

Law School Attended	
LPC Results	

Postgraduate Qualifications (if any) & subject	
University Attended	
Results	

University Attended & Degree Subject	
Results	

School/College	
A Levels/ A/S Levels	
Results	

Other Relevant Qualifications	
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Languages spoken & degree of fluency	
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Work History

Please detail any work experience you think is relevant to this application

In no more than one hundred words please highlight what strengths you can bring to Silverman Sherliker LLP and why you believe we should select you for a training contract.

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Hobbies and Interests

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Is there anything we need to know about you that would affect the way you would work with us?

Please circle:	YES	NO
If YES please give details		

Please confirm you will be available to commence a training contract on 5 July 2010
Please tick:

Yes I can confirm	<input type="checkbox"/>
No I cannot confirm	<input type="checkbox"/>

Referees

Please give name, title, address and telephone number

Academic Referee	Employment/Personal Referee

Applications will be accepted by post, fax, or e-mail (ncjl@silvermansherliker.co.uk) between 1st March and 31 March 2010.

Applicants will be called for a first interview in the second week of April.

Second Interviews will usually take place 1 to 2 weeks after the first interviews have been completed.

Due to the volume of applications only candidates successful in securing a first interview will be contacted

Please note that we only consider the information set out in this Application Form and therefore **do not** send a covering letter or any further documentation since this will not be retained on our files.

Equal Opportunities

How would you describe your ethnic origin : Please tick

<input type="checkbox"/> White	<input type="checkbox"/> White-Irish	<input type="checkbox"/> Black-African	<input type="checkbox"/> Black-Caribbean
<input type="checkbox"/> Black-Other	<input type="checkbox"/> Indian	<input type="checkbox"/> Pakistani	<input type="checkbox"/> Bangladeshi
<input type="checkbox"/> Chinese	<input type="checkbox"/> Asian-Other		<input type="checkbox"/> None of the above

Gender : Please tick

<input type="checkbox"/> Male	<input type="checkbox"/> Female
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Do you consider yourself to be disabled :Please tick

<input type="checkbox"/> Yes	<input type="checkbox"/> No
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Please confirm your age: Please tick

<input type="checkbox"/> 16 - 24	<input type="checkbox"/> 25 - 34	<input type="checkbox"/> 35 - 44	<input type="checkbox"/> 45 - 54	<input type="checkbox"/> 55 - 64	<input type="checkbox"/> 65 +
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Religion or Belief : Please tick

<input type="checkbox"/> Anglican	<input type="checkbox"/> Catholic	<input type="checkbox"/> Presbyterian	<input type="checkbox"/> Other Christian	<input type="checkbox"/> Buddhist
<input type="checkbox"/> Hindu	<input type="checkbox"/> Jewish	<input type="checkbox"/> Muslim	<input type="checkbox"/> Sikh	<input type="checkbox"/> Atheist
<input type="checkbox"/> Other Religion/Belief, please specify:				

Sexual Orientation: Please tick

<input type="checkbox"/> Heterosexual	<input type="checkbox"/> Lesbian	<input type="checkbox"/> Gay	<input type="checkbox"/> Bisexual	<input type="checkbox"/> Transexual
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Marital Status: Please tick

<input type="checkbox"/> Married	<input type="checkbox"/> Unmarried	<input type="checkbox"/> Same sex civil partnership
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