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**PEER REVIEWER PANEL APPOINTMENT**

**APPLICATION FORM**

**Once completed, please upload your application form (in Word format) to the Ministry of Justice eTendering System no later than 23:59 on 31st July 2022.**

Please read our Common Issues sheet and Information for Candidates prior to completing this form

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| PERSONAL INFORMATION |
| Surname: |
| Forenames: |

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| Please confirm the Category (ies) of Law you are applying to become a Peer Reviewer in Options list   * Crime * Family * Housing * Immigration and Asylum  Mental Health |

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| Please confirm that you are either a sole principal, an employee, a director, a partner in or a member of a Legal Aid Provider or an individual who has been a sole principal, an employee, a director, a partner in or a member of a Legal Aid Provider within the last 12 months |
| Please can you confirm your SRA number |
| Please confirm the following details of the Legal Aid Provider where you are currently employed or where you were employed within the last 12 months:  Firm name  Address and  LAA Account Number  LAA Account Numbers are alphanumeric and are 6 characters long, e.g., 1A234B and can be found on the Applicant’s current LAA Contract Schedule documentation. |
| **Please upload a completed Peer Reviewer Panel Appointment Supervisor Standard and Declaration Form** |
| Please can you confirm if you have attended Peer Reviewer Training in the last 12 months |
| If Yes please can you confirm the date and time of the session attended |

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| The applicant if they are successful will be able to provide 15 closed legal aid files (files opened from 1/8/19 and closed between 1/8/20 up to 31/7/22) for a Peer Review of their own work (PRPR) within 14 days of request. |

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| Do you want to apply to become a Senior Peer Reviewer? |
| Have you undertaken at least 20 Peer Reviews after 1st April 2017 in the category of law in which you are applying to be a Peer Reviewer? |

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| **DECLARATION** | |
| I declare that all the information I have given on this form is to the best of my knowledge and believe true and complete. I understand that if it is subsequently discovered that any statement is false or misleading, or that I have withheld relevant information, my application may be disqualified or, if I have already been appointed, I may be removed from the Panel. | |
| **Name:** | **Date:** |

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| **INFORMATION SECURITY** | |
| Please confirm that, if appointed, you will comply with all LAA Information Security policies and guidance and the Government’s mandatory policies in relation to information security including for the protection of Personal Data. These policies, which may be amended from time to time, include the HMG Security Policy Framework document dated May 2018, which can be found at: <https://www.gov.uk/government/publications/security-policy-framework>  The Peer Reviewer must work collaboratively with the LAA to ensure compliance.  **The answer you provide to this question may have an effect on your appointment or reappointment**. | |
| Yes | No |
| **Name:** | |
| **Panel applied for:** | |

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**All capitalised terms included in this document, are defined in the Peer Reviewer Contract**

**June 2022**