

## MAGISTRATES' COURT 32-36 TOWN RANGE GIBRALTAR

#### CIRCULAR TO ALL CHAMBERS

2 June 2023

Circ. 5 of 2023

### Compilation of Legal Aid Lists 2023 /2024

As practitioners will be aware, amendments were made to the legal aid and legal assistance legislation during 2018.

One of the changes which came in 2018 was the introduction of the Legal Representative Scheme – Duty Solicitor Protocol. This has meant that practitioners on the legal aid lists have taken part in a 'duty solicitor' scheme.

In accordance with the Protocol I will now be compiling new legal aid lists for the period commencing on the 1 October 2023 until 30 September 2024. Practitioners who wish to be included on the legal aid lists held by the Registrar of the Supreme Court and/or the Clerk of the Magistrates' Court must complete and return the 'Legal Aid Practitioner Application Form' to the Clerk of the Magistrates' Court.

Any practitioner who is currently included in the lists but who does not now re-apply will be removed.

In addition, senior practitioners are also invited to join the 'Senior Panel' by completing and returning the 'Senior Panel List Practitioner Application Form'.

Application Forms should be received by the Clerk by no later than 2pm on Friday 21 July 2023.

Maurice Turnock

Clerk of the Magistrates' Court



## <u>LEGAL AID LIST - PRACTITIONER APPLICATION FORM</u> (FOR THE PERIOD ENDING 30 SEPTEMBER 2024)

NAME:			<del></del>
24HR M	OBILE NUMBER(S):		
EMAIL A	DDRESS:	·	· <del></del>
YEAR OF	CALL (GIBRALTAR/E	ELSEWHERE):	
NAME O	Ė FIRM:		<u> </u>
FIRM SU	PERVISOR NAME:		·
FIRM SU	PERVISOR EMAIL:		
FIRM 24I	HR CONTACT NUMBI	ER(S):	
I WISH T	O BE INCLUDED IN:		
A.	The list held by the Rules 1960	Registrar pursuant to Rule 2(1)(a) L	egal Aid and Assistance
В.	The list held by the Aid and Assistance	Clerk of the Magistrates Court pursu Rules 1960	uant to Rule 2(1)(b) Lega
DATE:			
PRACTITIONER SIGNATURE:		FIRM SUPERVISOR SIGNATURE:	



# SENIOR PANEL - PRACTITIONER APPLICATION FORM (FOR THE PERIOD ENDING 30 SEPTEMBER 2024)

NAME:		
24HR MOBILE NUMBER(S):		
EMAIL ADDRESS:		
YEAR OF CALL (GIBRALTAR/ELSEWHERE):		
NAME OF FIRM:		· · · · · · · · · · · · · · · · · · ·
FIRM SUPERVISOR NAME:		
FIRM SUPERVISOR EMAIL:		
FIRM 24HR CONTACT NUMBER(S):		
I WISH TO BE INCLUDED IN THE SENIOR I AND QUEEN'S COUNSEL WHO WOULD BE W AND/OR COMPLEX CASES	PANEL OF PRACTITIONERS WI VILLING TO ASSIST DUTY SOLIC	TH 10 YEARS PQE CITORS IN SERIOUS
DATE:		
PRACTITIONER SIGNATURE:	FIRM SUPERVISOR SIGNATURE:	