

APPLICATION TO RENEW STUDENT ASSOCIATESHIP OF THE SOCIETY FOR 2009

(NOTE: This application is only for use by persons registered as a student with the Council for Licensed Conveyancers)

1. SURNAME: TITLE: Mr./Mrs./Miss/
2. FORENAMES: *(in full)*
3. ADDRESS FOR CORRESPONDENCE FROM THE SOCIETY: *(see Note 1)*
.....
..... *(County)* *(Postcode)*
4. DX NUMBER AND EXCHANGE: FIRM'S NAME:
5. TELEPHONE NO: HOME: OFFICE:
6. EMAIL: *(for our e-newsletters)*
7. ARE YOU PRESENTLY REGISTERED AS A STUDENT of the C.L.C.? (circle) YES NO
8. DO YOU STILL INTEND TO TAKE THE COUNCIL'S EXAMINATIONS? (circle) YES NO
If not, please reply using this form and we can amend our records to avoid troubling you further.
9. IF YOU WORK, PLEASE STATE:
 - (a) Do you work Full or Part-time?
 - (b) The nature of your work
10. IF YOU ARE PRESENTLY UNDERTAKING A COURSE OF INSTRUCTION please state:
 - (a) The name of the College/Institution directing your studies:
 - (b) The address of the above:
 - (c) The type of course (e.g. full-time, evening, correspondence, etc.):
 - (d) What is the approximate cost and length of your course? £..... Months:
 - (e) What level of examination? (e.g. Foundation or Final):
 - (f) Please specify any academic or professional qualification you may have:
11. Would you care to comment on the standard of your course, the tuition you are receiving, its value for money or any other relevant matter? The Society would welcome such observations. Please write on the reverse. *(See Note 3.)*
12. Would you be interested in attending a Society-run seminar, aimed at students, on the subject(s) of (NO / YES - specify subject(s))

I HEREBY CERTIFY that I am registered with the Council for Licensed Conveyancers as intending to sit that Council's examinations or obtain exemption therefrom. I am not a practising solicitor. I agree to comply with such rules as may be made by the Society's Board of Management for so long as I remain a Student Associate. I will notify the Society's Administrative Secretary of any change in my eligibility for Associateship or my address. **I attach a cheque for £35 (See Note 4) payable to "The Society of Licensed Conveyancers" or a direct debit mandate – available to download from our website (fee £30) as my Student Associate's registration fee until 31st December next.**

Signed: Date:

Note 1 Whenever possible, please give your home address or an address that is likely to remain permanent for the next year. Kindly state your County AND Postcode – our computer records require both. If you can receive mail at work via the document exchange please add the DX number to your address in 3 above.

Note 2 Questions 8 to 10 inclusive are for statistical purposes only.

Note 3 The source of any comments you make will be treated as confidential. Your comments are the only method by which the Society can obtain an impression of the relative strengths of the teaching institutions.

Note 4 The annual registration fee for Student Associates is £35 if paying by cheque (please make cheques payable to "the Society for Licensed Conveyancers")e, or £30 if paying by direct debit (the Direct Debit Mandate can be downloaded from the Society website).

Please complete and return this application and the appropriate fee *(see Note 4 above)* to the
Administrative Secretary, The Society of Licensed Conveyancers, SLC House, 42 Thornton Crescent,
Old Coulsdon, CR5 1LH ♦ DX 59851 COULSDON ♦ Tel. 0845 459 2194