AvMA Clinical Negligence Panel
Application for Reaccreditation
Declaration

Title: Forename(s): Surname:

Firm's Name:

Address:

DX:
Telephone: Email:

Solicitors
If you are a practising solicitor do you hold a current unconditional practising certificate?:

Yes / No

If no, please provide details on a separate sheet.

Date of admission to roll:

FILEX Applicants
If you are a current Fellow of the Institute of Legal Executives, when did you qualify?:

[Note you must be a current fellow of the Institute to qualify for membership of the AvMA panel and have passed the Institute's examinations in Civil Litigation and Tort.]

Filex membership number:

Are you or have you been subject to any disciplinary action by the Law Society/Institute of Legal Executives in the past five years where a finding was made against you?: Yes / No

If yes, please provide details on a separate sheet.

Declaration
I certify that all the information I have provided in support of my application for reaccredidation is true to the best of my knowledge and that I will abide by the procedures for reaccreditation and if reaccredited will continue to abide by the Obligations of an AvMA panel member and the Code of Conduct.

I enclose a non refundable fee of £450 + VAT (total = £528.75) payable to AvMA.

Signed …….. Date:…….