

**Pupillage Support Grants 2019**

**Information for Applicants**

**General**

In 2016 the Inn launched a new scheme to support its members in pupillage. The Pupillage Support Grant was created to provide financial support to those in pupillages with low levels of funding, doing work that is largely publicly funded.

**Eligibility criteria**

In order to qualify for a Pupillage Support Grant you must be:

* a member of Middle Temple;
* have been awarded a pupillage where you will be undertaking work which is principally publicly funded; and
* in receipt of a pupillage award no greater than £20,000 p.a. for London and £17,500 p.a. for outside of London.

**The Application**

To make an application, please complete the form below and email it to [scholarshipapplications@middletemple.org.uk](mailto:scholarshipapplications@middletemple.org.uk) Please also attach the Chambers Reference Form which has been filled out by your Head of Chambers, Head of Pupillage or Senior Clerk and which confirms the details of your pupillage. This must contain a wet signature (hand-written signature).

The Chambers Reference Form can be submitted with your application or alternatively sent directly to the Inn, by email to the address above or by post to Pupillage Support Grants, Ashley Building, Middle Temple, London, EC4Y 9BT. Your application will not be considered without a Chambers Reference form.

Applications should be submitted by 15:00 on Friday 10 May 2019. Please follow the instructions on the form carefully. Do not submit a C.V. or other documents with your application. Please ensure you initial each page and sign the declaration. Electronic signatures will be accepted on your application form.

You will not be interviewed as part of the application process. Instead your paper application will be assessed by a panel of Barristers and Judges.

**Financial Means Form**

You will find a financial means form enclosed within this application form. It is intended to helpthe panel assess your finances during your pupillage. Please complete this form for the whole 12 months. The information you provide will be treated with the strictest confidence and in accordance with the Inn’s Data Protection Policy. Further details of this policy can be found be at <http://www.middletemple.org.uk/about-us/data-protection>

When completing the form, please give us the most accurate information you can; verification may be requested. Please provide as much information as possible and add further detail using the space provided. When making estimates please be reasonable/realistic. If you have a valid reason for a figure being more than is normally to be anticipated, please provide an explanation of this in the space provided.

In the expenses section you find the following headings:

* *Rent/Mortgage Payments*: If your rent includes bills, there is no need to separate the payments between “rent” and “bills”, please put the total in rent with an explanatory note.
* *Bills:* this encompasses all forms of household utility bill, including internet and mobile phones.
* *Food*
* *Comfort and Wellbeing*: This is expenditure that covers items that provide quality of life and comfort. These may well include your hobbies and interests. Please be realistic in your estimate.
* *Leisure and Entertainment*: expenditure in this category is expected to cover a moderate social life. Please be realistic in your estimate.
* *Personal Items*: this covers expenditure for items such as clothing, toiletries, or dry-cleaning.
* *Transport:* This is the expenditure of getting to and from chambers.

In the space entitled “Amount Requested” please put an estimation of how much you are seeking to receive through your application. This figure should be realistic.

Please note: If your form is not completed fully, your application may not be processed and could be rejected.



**Application Form for Pupillage Support Grant**

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| **Title** |  |
| **Forename(s)** |  |
| **Surname** |  |
| **Email** |  |
| **Mobile Telephone** |  |

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| --- | --- |
| **Permanent Address** |  |
| **Postcode** |  |
| **Telephone** |  |

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| --- | --- |
| **Current Address**  (If different from above) |  |
| **Postcode** |  |
| **Telephone** |  |

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| **Middle Temple Number** |  |
| **Bar Council Number** |  |
| **Year of Call** |  |

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| **Name of Chambers**  (where you will be undertaking pupillage) |  |
| **Chambers Address** |  |
| **Postcode** |  |
| **Pupil Supervisor** |  |

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| **Supporting Statement**  Please explain why you need this grant and how it will assist you in completing your pupillage (400 Words Max) |
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| **If we are unable to provide you with a Pupillage Support Grant, how else will you fund your pupillage?** |
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| **If, having completed this form, you consider that there is something about your existing or anticipated financial position that has been missed, please provide that information below.** |
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**Once you have fully completed all of the relevant sections above, please follow the instructions below. Failure to do so may result in your application not being processed.**

1. Please make sure your Financial Means form fits on two pages only. If you need to change the font size of your comments, or put your comments in the separate box that asks for any other financial information on the previous page, please do so.
2. Type your initials on the bottom of every page, where indicated.
3. Read the declaration below, tick the boxes, then sign and date.
4. E-signatures will be accepted
5. Submit your form as per the instructions provided.
6. Please email your application to [scholarshipapplications@middletemple.org.uk](mailto:scholarshipapplications@middletemple.org.uk)

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| **DECLARATION**  *Please tick each box to confirm you have read and understood each statement, then sign and date the declaration.*  By signing this document;  I declare that the above particulars are true in all respects, and I will inform the Inn of any changes to my circumstances that occur while my application is being considered  I confirm that I am a member of Middle Temple  I confirm that I have been awarded pupillage at the Bar of England and Wales  I confirm that it is my intention to practise at the Bar of England and Wales  **Signature** ……………………………………………………………    **Date** ……………………… |

Data Protection

The Honourable Society of the Middle Temple (the Inn) processes and stores personal information in accordance with the Data Protection Act 2018 and the Inn’s Data Protection Policy.

By submitting your scholarship application you are agreeing to the Inn storing and using your data to administer your scholarship application, and to produce summary information for statistical, regulatory and audit purposes. The information that the Inn holds is mainly provided by yourself, but may also be collected from other sources such as references or information already in the public domain. The information will be held securely and will only be accessed by Inn staff with appropriate permissions. This information will be kept and used for the duration of the scholarship process and will be stored for 6 years, after which it will be confidentially destroyed. If you later become a member of the Inn you will need to complete an admission application form which will detail how your admission information is used and stored by the Inn.

If your contact details change it is your responsibility to update us so that the information we hold on you is accurate and up to date.

Third Parties

Your information will not be distributed to third parties unless it is anonymised, you give us explicit consent to do so, we are required to do so under a statutory or legal obligation, or are permitted to do so by the Data Protection Act. There are a small number of reasons where we may need to share some of your information with Third Parties for processes essential to managing your membership. In order to manage scholarship applications we will need to share some of your basic information with the other Inns of Court. For example, we will need to share your name and which University you are attending/have attended, for the sole purpose of ensuring that you have not applied for a scholarship at more than one Inn of Court in this current round of applications. We will also provide the General Council of the Bar (also known as the Bar Council) with some equality information, if provided, for statutory purposes.

If you want to view the Inn’s Data Protection Policy, have any queries or want to see the personal data the Inn holds on you by making a Subject Access Request, please visit the Data Protection page on our website for information http://www.middletemple.org.uk/about-us/data-protection.

**FINANCIAL MEANS DURING PUPILLAGE**

Please read the separate guidance sheet before filling in this form. Complete this form in pounds sterling, for the 12 months of your pupillage. Ensure the form remains on two pages in total.

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| Title: |  | Chambers: |  |
| First name: |  | Location of Chambers: |  |
| Surname: |  | Town/city you live in: |  |

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| **Anticipated Expenditure** | | | | |
|  | **Monthly Cost** | **Yearly Cost** | **Explanatory Notes**  *Please use this section to clarify your expenditure* | **For use by Panel** |
| **Rent/Mortgage Payments**  *If your rent includes bills please identify this in the explanatory notes* |  |  |  |  |
| **Bills**  *Includes mobile phones* |  |  |  |  |
| **Food** |  |  |  |  |
| **Comfort and Well-Being**  *Quality of life expenditure, this can include hobbies and interests* |  |  |  |  |
| **Leisure and Entertainment**  *Expenditure to cover a moderate social life* |  |  |  |  |
| **Personal Items**  *Covers items such as clothing, toiletries, or dry-cleaning* |  |  |  |  |
| **Transport**  *Covers transport to and from chambers.* |  |  |  |  |
| **Total Expenditure** |  |  |  |  |

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| --- | --- | --- | --- | --- |
| **Anticipated Income** | | | | |
|  | **Monthly Income** | **Yearly Income** | **Explanatory Notes**  *Please use this section to clarify your income* | **For use by Panel** |
| **Pupillage Award** |  |  |  |  |
| **Estimated earnings received from practice (2nd six)**  *In addition to minimum guaranteed earnings* |  |  |  |  |
| **Income from Family** |  |  |  |  |
| **Income from other sources** |  |  |  |  |
| **Total** |  |  |  |  |

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| Existing Indebtedness | | |  | Any Anticipated Indebtedness | | |  | Assets |  |
|  | **Amount** | **Due date** |  |  | **Amount** | **Due Date** |  |  | **Amount** |
| Student Loans |  |  |  | **Proposed bank loan(s)** |  |  |  | **Property** |  |
| \* |  |  |  | **\*** |  |  |  | **Savings** |  |
| \* |  |  |  | \* |  |  |  | **Investments** |  |
| TOTAL |  |  |  | **TOTAL** |  |  |  | **Total** |  |

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| **Amount Requested**  *Please identify the amount you hope to receive through this application* | |  |
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| **Final Award** | **For use by Panel** | |
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**Equality and Diversity Monitoring Form**

Middle Temple is committed to providing a professional home where all members of the Inn, at all stages of their career, are made to feel welcome and comfortable at the Inn. To that extent we strive to attract members of all backgrounds, cultures, and those with disabilities. We ask that applicants and members help us to measure our progress in achieving these goals by providing information about ethnicity, nationality, gender, and disability status.

The Middle Temple will connect this information to your individual profile on our Customer Relationship Management (CRM) system, and will occasionally use that data for various purposes. This may include (but is not limited to): creating statistics about our members for monitoring and reporting purposes (information will be anonymised for this purpose), targeting particular members for opportunities of interest, and event management. For a full list of how we might use this data please read the Inn’s Data Protection Policy, available on our website. All information will be stored and used in accordance with the Inn’s Data Protection Policy. No individual will be disadvantaged due to any equality and diversity information provided. We are also required to provide details about a member’s ethnicity, nationality and gender to The Bar Council of England and Wales once that member has been Called to the Bar, for the Bar Council to be able to create statistics for reporting purposes.

By submitting this form you are consenting to the Inn storing and using this information. Please note that there is no obligation to provide this information and failure to provide it will not disadvantage you in any way.

**Please note the panel interviewing you will not be given a copy of this questionnaire.**

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| **Gender**. Please specify to which gender you identify |
| Male Female Other Prefer not to say |
| If *other* please specify: |

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| **Disability**. Are you disabled within the meaning specified by the Equality Act 2010[[1]](#footnote-1) |
| Yes No Prefer not to say |
| If *yes* please provide detail[[2]](#footnote-2) |

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| **Nationality:** | |
| White | English/Welsh/Scottish/Northern Irish/British  Irish  Gypsy or Irish Traveller  Any other white background, please specify: |
| Mixed/Multiple | White and Black Caribbean  White and Black African  White and Asian  Any other mixed/multiple ethic background, please specify: |
| Asian/Asian British | Indian  Pakistan  Bangladeshi  Chinese  Any other Asian background, please specify: |
| Black/Black British | African  Caribbean  Any other Black/African/Caribbean background, please specify: |
| Other ethnic Group | Arab  Other, please specify: |
| Prefer not to say | If you would prefer not to say please tick here |

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| **Nationality:** Please specify your nationality, if you would prefer not to say, please write “prefer not to say” |
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| **Date of Birth:** |
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| **I consent to the supply of this information to the Bar Council and the Bar Standards Board for the purpose described above.** |
| Yes No |

If you have any other questions regarding how your data will be used please contact [dataprotection@middletemple.org.uk](mailto:dataprotection@middletemple.org.uk)

Or visit our website <http://www.middletemple.org.uk/about-us/data-protection>

1. The definition of disability is at section 6 of the Equality Act 2010 which provide that a person has a disability if they have a physical or mental impairment, and the impairment has substantial and long-term adverse effect on their ability to carry out normal day-to-day activities. [↑](#footnote-ref-1)
2. This will be treated in strictest confidence and only used in the provision of reasonable adjustments in interview or for arrangement of alternative access and assistance on our site. [↑](#footnote-ref-2)