

September 2018

REFERENCE CHECK PROCEDURES FOR ADMISSION AS AN ADVOCATE

Your application for admission as an advocate refers.

In order to furnish the Court with meaningful comments on your application, we need to verify certain information contained therein. To this end, a LexisNexis Reference Check and SAPS Fingerprint Clearance have to be done to verify your identity and perform credit and criminal checks.

1. LEXISNEXIS REFERENCE CHECK

Please complete the attached LexisNexis consent form and deliver the signed consent form to our offices as soon as possible. (Please note this must not be sent to LexisNexis, as we do the checks ourselves.)

2. SAPS LCRC FINGERPRINT CLEARANCE

We also require that you submit a LCRC Fingerprint Clearance certificate as verification of your criminal record status. In order to obtain same, you are required to:

- 2.1 attend at your local police station to complete a 91A form and to have your fingerprints taken;
- 2.2 pay the required amount to the SAPS for the performance of the criminal record check and the issuing of the clearance certificate;
- 2.3 (if in Cape Town) take the 91A form and proof of payment to:

SAPS Criminal Record Crime Scene Management offices
Room 523, Department of Labour
Thomas Boydell Building
Parade Street
Cape Town.

Alternatively, hand in the Fingerprint Clearance request form at your nearest South African Police Station and collect it from there again. (This procedure will take a few weeks longer.)

* Please note that you must apply for a fingerprint clearance (**NOT** police clearance).

It is your responsibility to ensure that the original Fingerprint Clearance certificate is delivered to our offices timeously.

Without being able to verify the information contained in your application, the Bar will not be able to comment on your application and will advise the Registrar of the Western Cape High Court accordingly.

Please ensure that all the required documentation is submitted to us as soon as possible but by no later than 2 weeks prior to the date of the hearing of your application, in order to allow sufficient time for us to consider the application and furnish the Court with our comments thereon prior to the hearing of your application.

ADMISSIONS & MEMBERSHIP COMMITTEE
Cape Bar Council



Consent and Indemnity Form

COMPANY INFORMATION "COMPANY"

| | | | |
|---------------|-------------------|-----------------|--------------|
| Company Name | CAPE BAR COUNCIL | Consultant Name | MRS H BRITS |
| Email Address | cbc@capebar.co.za | Phone Number | 021 424 2777 |

CANDIDATE PERSONAL INFORMATION

| | | | |
|------------------|--|-----------------|--|
| Surname | | Full First Name | |
| Maiden Surname | | Date Of Birth | |
| SA ID Number | | Passport | |
| Email Address | | Contact Number | |
| Physical Address | | | |

CANDIDATE SELF-DISCLOSURE

Criminal Record Check

| | | | | |
|--|-----|--------------------------|----|--------------------------|
| Have you ever been criminally charged? | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| If yes, detail of charge / conviction | | | | |

Academic Qualifications

| Qualifications | Institution | City | Year Completed | Student No. |
|----------------|-------------|------|----------------|-------------|
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Social Media

| | | | |
|------------------|--|-------------------|--|
| Current Employer | | Previous Employer | |
| Facebook URL | | Twitter Handle | |
| LinkedIn URL | | Pinterest | |
| Instagram | | Google+ | |
| YouTube | | Blogs | |
| Other | | Other | |

Initial

CONSENT TO PROCESS PERSONAL INFORMATION

I hereby:

- consent to the Company, its duly authorised agent, LexisNexis Risk Management (LNRM) and its data providers to process my personal information and conduct background verification checks including but not limited to; credit, criminal, qualifications, employment references, fraud prevention, ID verification, FAIS comprehensive, professional associations, driver's licence and social media;
- understand that all personal information is disclosed in confidence and will be kept confidential in a secure manner by the Company and LNRM;
- authorise the communication of the results of the background checks to the Company and LNRM who, in turn, will keep a copy on record, as per company policy;
- consent to this indemnity form being used from time to time for continued verification purposes for the duration of my engagement with the Company;
- authorize LNRM to receive and store my personal information for current, future or continued verification purposes (whether for the Company or for other legitimate purposes);
- confirm that I have been informed fully of the purposes of the background checks and that my consent is given voluntarily without coercion and that I may request a copy of this consent form to retain for my own purposes;
- declare that, to the best of my knowledge and belief, all of the information provided in connection with this application is full and correct and up to date; and
- undertake to supply any additional information that may be required by LNRM to verify the information given and will inform the Company of any alteration to the information provided.

I am aware that:

- any information furnished to the Company will be disclosed to me upon request and that I may dispute any information in the record as prescribed in the Protection of Personal Information Act 4 of 2013 or the National Credit Act 34 of 2005 (NCA);
- the Company is responsible for verifying the accuracy of information furnished by the South African Police Service;
- where my personal history requires background checks to be carried out in other countries where I have worked, studied or resided, my data may be transferred to and processed in the other countries, where the data protection laws may not be as strict;
- in processing my personal information, the Company or LNRM may have access to personal information of mine that is sensitive, including information about criminal behaviour related to the commission of or alleged commission of offences and my credit history;
- I have the right to withdraw my consent at any time by informing the Company that I wish to do so by completing the appropriate Withdrawal of Consent Form. I am also entitled to object to the processing of my personal information and to obtain a copy of my personal information at any time;
- the Company or LNRM may contact me and my referees by telephone, email, or post for the purposes set out above;
- verification requests form part of the background screening process;
- requests for credit information will only be conducted under the regulations of the NCA and data obtained from the Financial Sector Conduct Authority serves only for the purposes of determining the fitness and propriety as envisaged in the Financial Advisory and Intermediary Services Act 37 of 2002;
- requests for consumer credit information will be provided for the below prescribed purposes only:
 - considering me for employment in a position that requires honesty in dealing with cash and/or finances (as per relevant job description);
 - fraud detection and fraud prevention services;
- for the purpose of criminal background checks, my fingerprints will be captured and stored for a reasonable period. Any previously captured fingerprints may be used, where available;
- the purpose of background screening, including any social media checks, is for consideration of the results by the Company as part of my application and/or my suitability for employment;
- the social media information that may be covered in the background checks includes all social media accounts of which I am a member or user, and is not limited to the social media information listed on page one.

INDEMNITY

All signatories agree that LNRM, the Company, referees in my CV and/or the data providers shall not incur liability, and no claims will be made for any compensation in respect of any document or information obtained through such inquiries conducted in good faith. Furthermore, LNRM and the Company will not be held liable for relying on any inaccurate, misleading or outdated personal information provided by the data provider/s or the candidate.

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|------------------------------|--|----------------------|--|
| Signed at (Place) | | On DD/MM/YYYY (Date) | |
| Applicant/Guardian Name | | Consultant Name | |
| Applicant/Guardian Signature | | Consultant Signature | |