You will need to demonstrate:

* technical processes have been completed competently; and
* you act in a professional, principled manner as per the CLC Code-of-Conduct requirements.
* that your practical experience meets requirements of CLC Student-Training-Framework

**ALL CLC licence applicants** must complete a **Statement of Practical Experience**. This is a statement which confirms you have been in full or part-time, paid or un-paid employment assisting in the provision of probate services for at least 1200 chargeable hours; based on 25 supervised hours a week for 48 weeks, certified by an “Authorised Person” i.e. a licensed conveyancer, a solicitor or a FCILEX licensed to offer probate services directly to the public.

**NOTE 1.** ALL CLC licence applicants must provide a **Statement of Practical Experience** for the service they intend to provide (probate), certified by an Authorised Person in order to become eligible to apply for a CLC licence.

**NOTE 2.** Where appropriate probate supervision **cannot** be provided by the [CLC] Lawyer’s employer other appropriate supervision arrangements must be secured from another appropriate business; and be agreed with the CLC **BEFORE** the period of practical experience begins and any probate services are provided to the public. Email [traineelawyer@clc-uk.org](mailto:traineelawyer@clc-uk.org)

**NOTE 3**. Qualified Lawyers wishing to reinstate an expired licence are only required to complete 300 chargeable hours. This is less than the standard 1200 hours requirement in place for a first licence and recognises the applicant has previously held a valid licence. The 300 hours requirement ensures practise knowledge is up to date. Some education requirements may also apply. Please email [licensing@clc-uk.org](mailto:licensing@clc-uk.org)

**The CLC may as part of its standard application checks speak with Authorised Persons who have certified documentation.**

The form should be returned to the CLC as part of your application for a first licence. **Statements must be certified within a two year period prior to the date of submission of your CLC licence application.**

**TECHNICAL PROCESSES COMPLETED SATISFACTORILY**

|  |  |  |  |
| --- | --- | --- | --- |
| Tick when completed | | | √ |
| WILL INSTRUCTIONS  DATE FROM: TO: | | | |
|  | | | |
| 1 | Taking initial instructions for the preparation of a Will including client’s personal and financial details | |  |
|  |  |  |  |
| 2 | Advising on taxation implications of the deceased’s Will instructions | |  |
|  |  |  |  |
| 3 | Preparing draft Will and submitting the same to client with explanatory letter advising on effect thereof | |  |
|  |  |  |  |
| 4 | Attending client on signing and witnessing of Will | |  |
|  |  |  |  |
| 5 | Taking instructions for a Codicil and other steps as set out above for a Will | |  |
|  |  |  |  |
| 6 | Advising client on need for statement to be placed with the Will regarding reasonable financial provision for the client’s family members | |  |
|  |  |  |  |
| 7 | Drafting discretionary trust and other tax planning vehicles | |  |
|  |  |  |  |
| 8 | I confirm as the certifying lawyer that the applicant is competent in the above technical processes.  *Please initial in the box* | |  |

|  |  |  |  |
| --- | --- | --- | --- |
| GENERAL CONSIDERATION OF LAW IN THE FOLLOWING AREAS  DATE FROM: TO: | | | |
|  | | | |
| 1 | Inheritance (Provision for Family & Dependents) Act 1975 | |  |
|  |  |  |  |
| 2 | Wills Act 1837 in relation to: | |  |
|  |  |  |  |
| 3 | Validity of Will | |  |
|  |  |  |  |
| 4 | Execution and attestation of Will | |  |

|  |  |  |
| --- | --- | --- |
| 5 | Revocation of Will |  |

|  |  |  |
| --- | --- | --- |
| 6 | Revival of Will |  |

|  |  |  |
| --- | --- | --- |
| 7 | I confirm as the certifying lawyer that the applicant is competent in the above technical processes.  *Please initial in the box* |  |

|  |  |  |  |
| --- | --- | --- | --- |
| PROBATE INSTRUCTIONS  DATE FROM: TO: | | | |
|  | | | |
| 1 | Taking initial instructions from client including investigating all relevant papers relating to the deceased’s assets and liabilities | |  |
|  |  |  |  |
| 2 | Registering the death | |  |
|  |  |  |  |
| 3 | Registering death certificate with all companies | |  |
|  |  |  |  |
| 4 | Obtaining valuation of assets comprised within the estate | |  |
|  |  |  |  |
| 5 | Preparing IHT form with supplementary schedules | |  |
|  |  |  |  |
| 6 | Preparing form of oath for executors and for administrators with the Will annexed as appropriate | |  |
|  |  |  |  |
| 7 | Effecting completion of oath and thereupon making application to the probate registry for appropriate form of Grant | |  |
|  |  |  |  |
|  | Preparing all appropriate forms to effect closure and transfer of assets comprised  within the estate including bank accounts, building societies, insurance policies, National Savings investments of various kinds, National Savings Bank etc. | |  |
| 8 |  |
|  |  |  |  |
| 9 | Registering grant of probate with all companies and effecting encashment and closure of accounts and assets | |  |
|  |  |  |  |
| 10 | Writing to pecuniary and specific legatees to confirm their details and thereafter effecting payment of legacies | |  |
|  |  |  |  |
| 11 | Preparing and submitting section 27 Trustee Act 1925 advertisements | |  |
|  |  |  |  |
| 12 | Making payment of all outstanding liabilities of the deceased | |  |
|  |  |  |  |
| 13 | Making payment of pecuniary and specific legacies on production of prepared form of receipt and indemnity for each legatee | |  |
|  |  |  |  |
| 14 | Finalizing deceased’s income tax position including making final return to date of death and applying for refund or making final balance payment as appropriate | |  |
|  |  |  |  |
| 15 | Considering need and desirability of making interim distribution to the residuary legatees | |  |

|  |  |  |  |
| --- | --- | --- | --- |
| 16 | Prepared deed of variation | |  |
|  |  |  |  |
| 17 | Preparing disclaimer | |  |
|  |  |  |  |
| 18 | Preparing detailed estate accounts | |  |
|  |  |  |  |
| 19 | Making final distribution to residuary beneficiaries | |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 20 | I confirm as the certifying lawyer that the applicant is competent in the above technical processes.  *Please initial in the box* | |  | |
|  | | | | |
| GENERAL CONSIDERATION OF LAW IN THE FOLLOWING AREAS  DATE FROM: TO: | | | | |
|  | | | | |
| 1 | Non-contentious probate rules | | |  |
|  |  |  | |  |
| 2 | Inheritance (Provision for Family & Dependents) Act 1975 | | |  |
|  |  |  | |  |
| 3 | Considering and advising on home made Wills and, where appropriate, preparing appropriate forms of Oath of due executions, plight and condition etc. | | |  |

|  |  |  |
| --- | --- | --- |
| 4 | I confirm as the verifying supervising lawyer that the applicant is competent in the above technical processes.  *Please initial in the box* |  |

**DELIVERY OF POSITIVE OUTCOMES FOR CLIENTS**

|  |
| --- |
| **DEMONSTRATES PROFESSIONAL AND ETHICAL BEHAVIOUR** Tick when confident that the applicant/student acts in a principled manner consistent with the CLC Code of Conduct and delivers the relevant Outcomes |

|  |  |  |
| --- | --- | --- |
| **1** | **Overriding Principle - Act with independence and integrity** |  |
| 1.1 | Outcome – Clients receive good quality independent information, representation and advice |  |
| 1.2 | Outcome – Clients receive an honest and lawful service |  |
| 1.3 | Outcome – Client money is kept separately and safely |  |
| **2** | **Overriding Principle - Maintain high standards of work** |  |
| 2.1 | Outcome – Clients are provided with a high standard of legal services |  |
| 2.2 | Outcome – Client matters are dealt with using care, skill and diligence |  |
| 2.3 | Outcome - Appropriate arrangements, resources, procedures, skills and commitment are in place to ensure Clients always receive a high standard of service |  |
| **3** | **Overriding Principle – Act in the best interests of Clients** |  |
| 3.1 | Outcome – Each Client’s best interests are served |  |
| 3.2 | Outcome – Clients receive advice appropriate to their circumstances |  |
| 3.3 | Outcome – Clients have the information they need to make informed decisions |  |
| 3.4 | Outcome – Clients are aware of any referral arrangements and that they are consistent with the firm’s responsibilities both to them and to the CLC |  |
| 3.5 | Outcome – Clients are aware of any limitation or any condition resulting from the firm’s relationship with another party |  |
| 3.6 | Outcome - Clients’ affairs are treated confidentially (except as required or permitted by law or with the Client’s consent) |  |
|  | **No requirement to complete assessment against Overriding Principles 4 and 5 of the Code of Conduct, these are provided for reference only** |  |
| **4** | **Overriding Principle – Comply with duty to the court** |  |
|  | This principle is applicable only to litigation and advocacy |  |
| **5** | **Overriding Principle - Deal with regulators and ombudsmen in an open and co-operative way** |  |
| 5.1 | Outcome – Acts in accordance with their regulatory responsibilities |  |
| **6** | **Promote equality of access and service** |  |
| 6.1 | Outcome – The service is accessible and responsive to the needs of individual Clients, including those who are vulnerable |  |
| 6.2 | Outcome – No-one dealt with is discriminated against (whether directly or indirectly), victimised or harassed |  |
| 6.3 | Outcome – accepts responsibility where the service provided is not of the expected standard and provide appropriate redress for the Client where necessary |  |
| 6.4 | Outcome – the handling of complaints takes proper account of Clients’ individual needs, including those who are vulnerable |  |
| 6.5 | Outcome – Complaints are dealt with impartially and comprehensively |  |

# DECLARATION

**I confirm that the details shown above are complete & correct**

|  |  |
| --- | --- |
| Applicant Name:  [IN CAPITALS] |  |
| Signed: Date: | |

**DECLARATION**

**I certify that the details shown above are complete and correct.**

|  |  |  |  |
| --- | --- | --- | --- |
| Authorised Person Name  [IN CAPITALS] |  | | |
| Signed: Date: | | | |
| Licensed Conveyancer  Licensed Probate Practitioner  Solicitor  FCILEx | | | |
| Licence or Practicing Certificate number |  |  |  |
| In what capacity are you certifying the applicant? |  |  |  |
| Work Email: Work Phone: | | | |

Please note.The CLC may as part of its standard application checks speak with Authorised Persons who have certified documentation.