



THE SCOTTISH LEGAL AID BOARD
Criminal Legal Assistance Register

Application by firm, as recognised by the Law
Society of Scotland, for registration

FIRM

*This form is for use by
a firm of solicitors*

Name of applicant firm:	Firm legal aid code:
Principal business address	
Name of Compliance Manager/sole practitioner: (see Code of Practice, paragraph 2.1 – 2.6)	

DECLARATION

- **I am the only solicitor connected to the firm** (Tick box if this statement applies).
- **As Compliance Manager/sole practitioner in the above firm, I apply for the name of the firm to be entered in the Criminal Legal Assistance Register.**
- **I confirm that all the details contained in this application are correct.**
- **I DO
I DO NOT**
set targets for staff in the firm(s) with which I am connected. I attach to this application a copy of the written instructions to staff relating to targets.
- **I confirm that the firm complies with and will continue to comply with the Code of Practice for Criminal Legal Assistance. I confirm the firm's Compliance Manual has been prepared in accordance with paragraph 2.4 of the Code and is held and controlled by me, [or: will be produced within one month of the date of registration], and will be exhibited to SLAB upon request.**
- **I confirm I will undertake the responsibilities of Compliance Manager as described in paragraph 2.6 of the above Code.**

..... (Signature) (Date)
Compliance Manager/sole practitioner

After completion, please send the form and any document(s) to:

criminalregister@slab.org.uk

OR

Receipts & Payments, The Scottish Legal Aid Board, Thistle House, 91 Haymarket Terrace, Edinburgh, EH12 5HE (DX 555250 General Mail, Edinburgh 30)