

## AUTHORISATION AND CONSENT FORM

To: The Judicial Appointments Committee

I, [*Insert full name and surname*] holder of identity card number [*insert ID Card Number*] residing at [*Insert full address*] (please print), in consideration of the review and assessment of my application for appointment as a [Magistrate of the Inferior Courts/Judge of the Superior Courts]<sup>1</sup> do hereby:

1. Authorize the Commission for the Administration of Justice (including any committee thereof including the Committee for Advocates and Legal Procurators), the Chamber of Advocates and any statutory or public authority or Government Department to provide to the Judicial Appointments Committee any documents, records or other information pertaining to my professional or personal conduct and activities as well as with respect to my moral character and fitness to perform the responsibilities of a magistrate/judge and to furnish the originals or copies of any such documents, records or information to the Judicial Appointments Committee through its secretary;
2. give my consent to background checks (as set out in the Appendix) that the JAC may conduct to determine my suitability for public office, either because I am being considered for an appointment, or because the validity of my previous check will soon expire.
3. give my consent to the Judicial Appointments Committee to make consultations in both the legal and non-legal community regarding the suitability of my appointment to the bench;
4. release, remise and forever discharge the Commission for the Administration of Justice (including any committee thereof) and the Chamber of Advocates together with their staff, and their members, and all individuals consulted in respect of my aforesaid candidature from any and all claims, courses of action, suits, actions and liabilities of every nature and kind whatsoever arising from, as a result of or in any way related to the release of the aforesaid information and documents and/or the consideration and assessment of my said application and candidature.

Dated this day of 20\_\_\_\_\_

Signature \_\_\_\_\_

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<sup>1</sup> Delete as applicable, or in the case of an application for either of the two retain both.

## APPENDIX TO AUTHORISATION FORM

I understand that checks of my background are required to determine my suitability for public office, either because I am being considered for an appointment, or because the validity of my previous check will soon expire.

These background checks will include the following checks:

1. a check of my fingerprints by the Executive Police of police records relating to me, and where applicable, enquiries with police forces (the expression "police records" includes information related to criminal charges and/or convictions, details surrounding an offence or intelligence concerning a person's involvement or suspected involvement in criminal activity);
2. a check with the Inland Revenue Department (IRD) – the IRD will indicate to the Judicial Appointments Committee by, without providing detailed particulars, whether there are any significant compliance-related issues relating to me under any Act administered in whole or in part by the IRD; and

I understand that applications to the judiciary may be considered at any time for a period of two (2) years and may be renewed by me by way of a separate application.

Therefore, I acknowledge and concur that this consent is valid for the entire period of my application for up to two (2) years beyond the date of my signature below. I understand that the information the Judicial Appointments Committee receives will be held in confidence and used according to law.

Dated this day of 20 \_\_\_\_\_

Signature \_\_\_\_\_