

CONFIDENTIAL

**Legal Profession Uniform Law Application Act 2014 (Vic) (No. 17 of 2014)
and the
Legal Profession (Admission) Rules 2015; Rule 19**

**Request and consent to the provision of a Student Conduct Report
to the Victoria Legal Admissions Board or the admitting authority
under Admission Rule 19 of the Legal Profession Uniform Admission Rules 2015**

- 1 I, (name) of
..... (postal address)
..... (student ID No)
..... (date of birth)

request the University of Melbourne to provide directly to the Victorian Legal Admissions Board or the admitting authority of another State or Territory if requested, a report that satisfies the Board's requirements as set out in Rule 19 of the Legal Profession Uniform Admission Rules 2015.

(See http://lsbc.vic.gov.au/?page_id=248)

- 2 I acknowledge that the University considers that the scope of the *Guide for Applicants: Admission as a Lawyer in Victoria* Clause 7 Student Conduct Reports (Part D) <https://www.lawadmissions.vic.gov.au/admission-procedure> goes beyond the terms of Rule 19 of the Legal Profession Uniform Admission Rules 2015.
- 3 Notwithstanding the scope of the Board's request, I request and consent to the provision of the report by the University to the Board or admitting authority.
- 4 I note that the information to be provided by the University will be based on what is in the available records and files of the University, although the University may need to refer a matter to a relevant member of staff where the records are not clear or need clarification for the purposes of completing the report.
- 5 I acknowledge that my duty of disclosure under Rule 17 of the Legal Profession Uniform Admission Rules 2015 is not limited to the matters that may be disclosed in the report by the University to the Board or admitting authority.
- 6 I acknowledge that the University is not required to confer with me prior to forwarding a copy of the report to the Board, although it may choose to provide a copy to me or a copy of what has been provided to the Board can be requested from the University.

.....
Graduate Signature: (PLEASE SIGN BY HAND
or PROVIDE DIGITAL SIGNATURE)

.....
Date: DD/MM/YYYY
