



## JUDICIAL WORK SHADOWING SCHEME APPLICATION FORM

Please complete this form in BLOCK CAPITALS.

**Note:** Please complete carefully as any gaps in your application may cause delay in arranging your shadowing placement.

### 1. Personal details

Title:

Professional surname:

Surname (if different from professional surname):

Forenames in full:

The name by which you prefer to be known:

Date of birth (DD/MM/YY):

Mobile number:

Daytime telephone number:

Email Address:

Address:

## **2. Legal Qualification**

Please state your legal qualification:

## **3. Career History**

Please give brief details of your career history for the last 5 years, including the areas of law in which you have built up expertise. Please limit your description of professional experience to 300 words:

## **4. Work shadowing**

How many days would you prefer to work shadow?:

Do you have a preferred location to work shadow: for example sheriffdom or court?

Please indicate any preferences for the type of work you want to experience, or any specific objectives you have (e.g. sheriff and jury work). Please note that we cannot guarantee that you will see this type of work, but we will make every effort to achieve it:

## 5. Availability

Please state suitable dates for placements over the next six months:

## 6. Reasonable adjustments for disabled applicants

If you have a disability, please indicate if you have any particular requirements. Reasonable adjustments will be made for applicants with disabilities:

Please sign, or type your name if submitting electronically:

Date:

Please email the completed form to: [JudicialOfficeforScotland@scotcourts.gov.uk](mailto:JudicialOfficeforScotland@scotcourts.gov.uk)

Alternatively you may post it to:

Strategy & Governance Branch  
Judicial Office for Scotland  
Parliament House  
Edinburgh  
EH1 1RQ