



Request for Ethics Committee Ruling

SECTION 1: WHAT IS THIS FORM?

Practitioners should use this form to request a non-binding ruling from the Ethics Committee. Please ensure you have read the information sheet *Requesting an Ethics Committee Ruling* to assist you in preparing your submission. Please type directly into this form.

You may also contact the Ethics Department on (03) 9607 9336 for further enquiries.

Post complete forms and supporting documentation to:

Ethics Department
Law Institute of Victoria
G.P.O. Box 263C
MELBOURNE 3001

or

DX 350
MELBOURNE

SECTION 2: YOUR CONTACT DETAILS

Your Firm	_____
Your Name	_____
Postal / DX Address	_____
Phone	_____
E-mail	_____
Fax	_____
LIV member Number	_____



SECTION 3: THE OTHER FIRM'S CONTACT DETAILS

Is there another Firm involved?

Yes / No

Firm Name
Contact Name
Postal / DX Address
Phone
E-mail
Fax

Is the other practitioner aware you are contacting us?

Yes / No

Are you providing a copy of this request to the other practitioner?

Yes / No

Do you consent to the other practitioner being contacted about this request?

Yes / No

If NO, why?

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SECTION 4: REQUEST DETAILS

a) What is the general nature of the ethical issue? (for example, alleged conflict of interest)

b) What question or outcome do you seek from the Ethics Committee?

c) Please provide a chronology of events: (Please indicate whether this is provided as a separate attachment to this form)



SECTION 5: SUPPORTING DOCUMENTS

Have you attached all supporting documentation?
(see Information Sheet for examples of supporting documentation)

Yes / No

Please list all documents that relate to this request.

- 1
- 2
- 3
- 4
- 5

I understand that a copy of this form and other materials provided may be given to the other party(ies) involved and to members of the Ethics Committee on a confidential basis.

Signature of applicant _____ Date _____