**ORIGINATING APPLICATION EX PARTE**

SUPREME COURT OF SOUTH AUSTRALIA

CIVIL JURISDICTION

**Please specify the Full Name of the Applicant.**

Applicant

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| Applicant |  | | | |
| **Full Name (including Also Known as, capacity (eg Administrator, Liquidator, Trustee) and Litigation Guardian Name (if applicable))** | | | |
| Address |  | | | |
| **Street Address (including unit or level number and name of property if required)** | | | |
|  |  |  |  |
| **City/town/suburb** | **State** | **Postcode** | **Country** |
|  | | | |
| **Email address** | | | |
| Phone Details |  | | | |
| **Type - Number** | | | |

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| **Application Details**  This Application is for admission as a barrister and solicitor of the Supreme Court of South Australia.  This Application is made under section 15 of the Legal Practitioners Act 1981.  This Application is made on the grounds set out in the accompanying affidavit sworn by the applicant on the day of 20 . |

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| **Accompanying Documents**  **Mark appropriate section below with an ‘x’**  Accompanying this Application is a:  [ ] Supporting Affidavit (mandatory) |