**Application to attend public misconduct hearing**

If you wish to attend a hearing, please complete the form below.

**Hearing for:** Click here to enter text. **Date:** Click here to enter a date. **Time:** Choose an item.

Please note: a red asterisk (\*) denotes a required field.

**Name:**\* Click here to enter text.

**Address:**\* Click here to enter text.

**Date of birth** **(dd/mm/yyyy):**\* Click here to enter a date.

**(Please note that these details are required for security purposes only and will not be retained)**

**Email address:**\* Click here to enter text.

**Phone number:**\* Click here to enter text.

**Please mark the box if you are a member of the press:** [ ]

Please ensure you bring your official press ID.

**Do you have a disability?** Yes [ ]  No [ ]

Whilst we will make every attempt to reply to each application, this may not always be possible due to the number of applicants.

If you are successful in your application you will receive an email confirmation detailing the dates you have been allocated and providing the arrangements for the day.

You are required to bring a copy of the confirmation email, supporting identification and proof of address when you attend.

**I confirm that I have read and agree to abide by the conditions of entry:**\* [ ]

**If you wish to be considered for the next day of the same hearing please tick this box:**\* [ ]

Please note you will need to submit an application form for each day of the hearing.