Please submit completed application by email to: courtadr@mandellgisnetcenter.org.

# Contact Information

Name:

Organization or Firm:

Mailing Address:

Email:

Telephone:

# Education and Training

a. Education: Please include the name and location of each educational institution attended, the dates of attendance, and the specific degree(s) conferred. All CDM Panel members are required to have a *juris doctor* degree from an accredited college or university. (Or attach resume or CV containing this information).

b. Mediation panelists must have a minimum of 10 years’ experience as a practicing attorney to be considered for the panel. Please describe your work experience, nature of cases handled, and specialties, if any. Please list your work history or attach a resume or CV containing this information.

c. Training: Please provide the name, location, date(s) and duration for each mediation training attended. Please give the name of the institution or program providing the training. Please provide the total number of hours you have spent in mediation training. If you are currently enrolled in a training program please identify the program and provide your date of completion.

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# Mediation Experience

* 1. If you have acted as a mediator in the past, please describe your experience as a mediator, listing the types of cases you have been involved in and the dates of your involvement. Please list up to 5 recent cases. Please provide contact information for any attorneys involved in the mediations you have conducted, and the outcome of each mediation.
	2. Additional mediation experience: Please describe below any additional mediation experience (not including court ADR experience, see below), including any significant experience you have had mediating as an attorney for a party.

# ADR Court Experience

* 1. Do you now serve or have you ever served as a mediator, arbitrator, or other type of neutral on a court ADR program?
		+ Yes ☐ No

If yes, describe your prior service below. For each, please include the name and location of the court, type of panel, approximate number and types of cases handled, dates of service and, if no longer serving, the reason for suspending or terminating service.

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* 1. Have you ever been suspended or removed as an ADR neutral, either temporarily or permanently, by a court or ADR organization serving the court?
		+ Yes ☐ No

If yes, describe the circumstances, including the court, the date suspended or removed, and the reason(s) for suspension or removal. Attach additional pages if necessary.

# Other Professional and Personal Qualifications

* 1. California State Bar Number: Date of admission:

Any other State Bar License:

State(s) and Number(s):

Date(s) of Admission:

* 1. Please confirm:
		+ I am in good standing in each state in which I am licensed to practice law.
		+ If not, please provide explanation on an additional page.
	2. If certified as a specialist by the State Bar of California Board of Legal Specialization or by an organization whose certification program has been accredited by the State Bar of California, please list areas of specialization:
	3. If certified by other states or ADR organizations with a certification program as a mediator or other type of neutral, for each certification, please provide the name, location and contact information of the organization, date(s) of certification, and minimum requirements for the certification.

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* 1. Have you ever been disciplined by the State Bar of California, a bar association, a public disciplinary or professional licensing agency or an ADR organization or entity in any state or by a court of record, including but not limited to being sanctioned (other than sanctioned for violation of the Civil Discovery Act) or held in contempt?
		+ Yes ☐ No
	2. Has there been any entry of judgment against you in any civil action for actual fraud or punitive damages?
		+ Yes ☐ No
	3. Have you ever been a party to a lawsuit?
		+ Yes ☐ No
	4. Have you ever been declared a vexatious litigant?
		+ Yes ☐ No

If yes to questions 5 e- h, please provide additional information in an attachment.

# Additional Information

Please explain why you would like to be considered for inclusion in the mediator panel for Superior Court, County of Monterey.

Please provide additional information regarding background, situation, circumstances or other additional facts that may positively or negatively reflect on suitability for appointment and should be disclosed to the court:

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# References

Please list at least three professional references, two of which must be from a party or attorney who appeared before you in mediation. For each reference, provide their name, address, telephone number, and email address, and also provide the date(s), case name(s) and case type(s), and the reference’s role in the mediation (attorney, party, or co- mediator), if applicable.

# Acknowledgment, Compliance and Signature

I understand and acknowledge that the approval of my application to serve as a mediator on the court’s Civil Mediation Program panel is solely at the discretion of the court.

If approved, I will comply with all applicable provisions contained in the California Rules of Court, local rules and court policies and procedures.

I declare under penalty of perjury under the laws of the State of California that the foregoing, including statements made in all attachments, is true and correct. I understand that any misstatement or omission of material fact may disqualify me from serving as a mediator on the Court Directed Mediation Panel.

# Date:

**Signature of Applicant: Printed Name:**

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