

ADR APPLICATION
Berrien County Trial Court
General Information

COMPLETE THOSE PARTS OF THIS APPLICATION FOR WHICH
YOU DESIRE CONSIDERATION

New Application: _____

Renewal: _____

Name _____ Profession _____

Name of firm/organization _____

Address _____

Telephone _____ Fax _____ E-Mail Address _____

Education, professional credentials, affiliations, degrees and year obtained

Admitted to the Bar: _____ Began practicing law: _____ Bar No. _____

Years of professional experience other than as a mediator/evaluator _____

Number of years as practicing attorney in Michigan _____ Years _____ Months

Are you a member in good standing of the State Bar of Michigan? Yes No

Do you reside in Berrien County? Yes No

Do you maintain an office in Berrien County? Yes No

Do you have an active practice in Berrien County? Yes No

Have you ever been subject to discipline by the Michigan Attorney Discipline Board or any other state or federal agency or court? Yes No If yes, explain:

Please attach copies of all professional licenses.

Provide any additional information about you, which would be helpful in describing your qualifications to serve in our ADR Program, i.e. teaching law school courses:

CIVIL MEDIATOR APPLICATION

To be eligible to serve as a general civil mediator, you must meet the training and experience criteria specified either in MCR 2.411(F)(2) or in the SCAO Mediation Training Standards and Procedures pursuant to MCR 2.411(F)(3).

Service as a case evaluator under MCR 2.403 does not constitute a qualification for serving as a mediator. Refer to the Mediation Training Standards and Procedures for further information about minimum qualifications.

Note: Except for Part B, the information provided in this application is available to the public for inspection.

Please type or print neatly.

1. Full name (first, middle initial, last)		2. Bar no. if applicable P
3. Address where you can be contacted		
4. Telephone no. ()	5. Fax no. ()	6. E-mail address

Part A: General Civil Mediator Qualifications Complete item 7 and either item 8, 9, or 10 as appropriate.

7. Is this a new application? renewal? Contact the local court for renewal requirements before submitting this application.

8. Qualification through State Court Administrative Office (SCAO) Approved Training

a. SCAO-approved training completed on _____ . Attach copy of certificate.
Date

Trainer: _____

b. Juris doctorate. Attach copy of diploma if not a licensed attorney.

Graduate degree in conflict resolution. Attach copy of diploma.

40 hours of mediation experience in the past 2 years. Detail below. Complete on separate page if needed.

c. Observed two general civil mediation proceedings. Specify dates and mediator names and attach verification. Do not provide party names.

d. Conducted one general civil mediation to conclusion. Specify date and name of mediator serving as supervisor and attach verification. Do not provide party names.

9. Qualification by Community Dispute Resolution Program (CDRP) Training

a. Michigan CDRP training completed on _____ . Attach copy of certificate.
Date

Trainer: _____

If the training was completed more than 2 years before applying, applicant must have completed 8 hours of advance mediation training in the 2 years before applying. Specify type of training, dates, and trainers, and attach copy of certificate.

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Part A: General Civil Mediator Qualifications (continued)

- 9. b. Observed two general civil mediation proceedings. Specify dates and mediator names and attach verification. Do not provide party names.

- c. Conducted one general civil mediation to conclusion. Specify date and name of mediator serving as supervisor and attach verification. Do not provide party names.

- d. If not an attorney or a person holding a juris doctorate or graduate degree in conflict resolution, mediation, or comediation, applicant must have mediated at least 40 hours or 18 cases in the 2 years before applying. Detail below. Complete on separate page if needed. Do not provide party names.

10. Qualification by Training Outside of Michigan

- a. Completed a comprehensive training course of at least 40 hours designed for general civil case mediation. Attached are: (1) a certificate of completed training, (2) a copy of the training agenda, (3) the name of the trainer, and (4) the dates of attendance.

- b. If the training was completed more than 2 years before applying, applicant must have completed at least 8 hours of advanced mediation training in the 2 years before applying. Specify type of training, dates, and trainers, and attach copy of certificate.

- c. Observed two general civil mediation proceedings. Specify dates and mediator names and attach verification. Do not provide party names.

- d. Conducted one general civil mediation to conclusion. Specify date and name of mediator serving as supervisor and attach verification. Do not provide party names.

- e. If not an attorney or a person holding a juris doctorate or graduate degree in conflict resolution, mediation, or comediation, applicant must have mediated at least 40 hours or 18 cases in the 2 years before applying. Detail below. Complete on separate page if needed. Do not provide party names.

CERTIFICATION

I certify that I: (a) meet the requirements for service under the court's mediator selection plan; (b) will not discriminate against parties or attorneys on the basis of race, ethnic origin, gender, or other protected personal characteristic; and (c) will comply with the court's ADR plan, orders of the court regarding cases submitted to mediation, and the standards of conduct adopted by the State Court Administrator. My hourly fee is \$ _____ .

Date

Signature

Full name (first, middle initial, last) (print or type)	Bar no. (if applicable) P
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Part B: Gender and Race Information

Providing the following information is optional. It is requested in accordance with MCR 2.411(E)(1)(c) and will be maintained separately from your application.

Check the boxes that apply to you.

Gender:

Female Male

Race/Ethnicity:

- American Indian or Alaskan Native
- Asian or Pacific Islander
- Black/African American (non-Hispanic)
- Hispanic
- White/Caucasian (non-Hispanic)
- Other (specify): _____

Part C: Observer Information and Pro Bono Services

Providing the following information is optional and will be maintained separately from your application.

1. Once you have been qualified by the court to serve as a mediator:
 - a. Are you willing to be observed by a prospective mediator? Yes No
 - b. Are you willing to observe a prospective mediator in mediation pro bono? Yes No
2. Are you willing to accept appointment from the court to serve as a pro bono mediator once a year? Yes No

CASE EVALUATION (MCR 2.403; 2.404(b)(2))
Berrien County Trial Court

Years of professional experience other than as a case evaluator _____

Years of experience in ADR and hours in direct mediation _____ Years _____ Hours

Fees/hourly rate _____

Have you completed a minimum 20 hour training course conducted or approved by any of these organizations: (FMCS-Federal Mediation Conciliation Services; SPIDR-Society of Professionals in Dispute Resolution; NIDR-National Institute of Dispute Resolution; CDRP-Community Dispute Resolution Program)? Yes No

Do you have direct experience as an ADR evaluator in Civil cases, excluding family division cases? Yes No

If yes, please list approximate number of hours, excluding family division cases _____

Indicate the percentage of your law practice for the past 5 years devoted to civil litigation matters, including investigation, discovery, motion practice, case evaluation, settlement, trial preparation and/or trial:
_____ % Plaintiff _____ % Defense

Indicate the percentage of your current trial practice in the following areas:

Personal injury/Auto negligence	_____ % Plaintiff	_____ % Defense
Professional malpractice	_____ % Plaintiff	_____ % Defense
Product liability	_____ % Plaintiff	_____ % Defense
Commercial	_____ % Plaintiff	_____ % Defense
Labor and Employment	_____ % Plaintiff	_____ % Defense
Condemnation	_____ % Plaintiff	_____ % Defense
Other: _____	_____ % Plaintiff	_____ % Defense
Other: _____	_____ % Plaintiff	_____ % Defense

Types of cases accepted for mediation _____

Indicate which you primarily represent: Plaintiff Defendant Neutral (not representing a majority of either)

NOTE: Copies of all certificates of completion or other documentation for all mediation training must be provided with application. Copies of certificates provided: Yes No

I certify that I meet the Berrien County and/or State of Michigan requirements for service as a Case Evaluator. I will maintain records of the number of hours spent in direct facilitative mediation utilizing the mediation log supplied in the ADR Roster. I will not discriminate against parties, attorneys, or other mediators on the basis of race, ethnic origin, gender, or other protected personal characteristic

(Signature) DATED _____

For Department Use Only

Certificates received? Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	Logs Received? Yes <input type="checkbox"/> No <input type="checkbox"/>
<input type="checkbox"/> Approved <input type="checkbox"/> Denied/Reason _____	
By _____	Date _____

Statistics
Berrien County Trial Court

Optional: This portion of application is for statistical purposes only, is requested in accordance with MCR 2.404 (B)(1) and will be removed prior to review.

Name _____

Applicant's Gender _____ Applicant's Racial/Ethnic Background _____

ARBITRATION
Berrien County Trial Court

Years of professional experience other than as an arbitrator _____

Years of experience in ADR and hours in direct arbitration _____ Years _____ Hours

Fees/hourly rate _____

(For non-lawyers) Number of years senior level business experience _____
Area or type of business _____

(For attorneys) Number of years legal experience _____
Area or type of practice _____

Please list the type of cases you wish to arbitrate and describe your experience (days or hours) in those types of cases (attach additional sheet if necessary)

Indicate the percentage of your law practice for the past 5 years devoted to civil litigation matters, including investigation, discovery, motion practice, case evaluation, settlement, trial preparation and/or trial:

_____ % Plaintiff _____ % Defense

Indicate the percentage of your current trial practice in the following areas:

Personal injury/Auto negligence	_____ % Plaintiff	_____ % Defense
Professional malpractice	_____ % Plaintiff	_____ % Defense
Product liability	_____ % Plaintiff	_____ % Defense
Commercial	_____ % Plaintiff	_____ % Defense
Labor and Employment	_____ % Plaintiff	_____ % Defense
Condemnation	_____ % Plaintiff	_____ % Defense
Other: _____	_____ % Plaintiff	_____ % Defense
Other: _____	_____ % Plaintiff	_____ % Defense

Describe arbitration training received and associated dates of training _____

NOTE: Please attach certificate of completion or other documentation of all arbitration training you want listed on the roster. Copies of certificates provided: Yes No

I certify that I meet the Berrien County and/or State of Michigan requirements for service as an Arbitrator, I will maintain records of the number of hours spent in direct arbitration utilizing the mediation log supplied in the ADR Roster. I will not discriminate against parties, attorneys, or other mediators on the basis of race, ethnic origin, gender, or other protected personal characteristic.

(Signature) DATED _____

For Department Use Only

Certificates received? Yes No N/A Logs Received? Yes No

Approved Denied/Reason _____

By _____ Date _____