



**SUPERIOR COURT OF CALIFORNIA  
COUNTY OF SACRAMENTO**

720 NINTH STREET ~ ROOM 101  
SACRAMENTO, CA 95814-1380

(916) 874-5522

[WWW.SACCOURT.CA.GOV](http://WWW.SACCOURT.CA.GOV)

**ARBITRATOR PANEL APPLICATION**

*Please be advised that as a consequence of budget cuts, the Court no longer pays for arbitrators; in view of their court-appointed status, all arbitrators are required to provide pro-bono services.*

*The Court greatly values the panel of volunteers and the benefits the program provides to the litigants, counsel, and the Court. Thank you for your willingness to reside on the panel and submitting your application for review.*

**I. PERSONAL INFORMATION**

Name: \_\_\_\_\_

Firm Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Fax Number: \_\_\_\_\_

**II. EXPERIENCE**

Date admitted to the California Bar: \_\_\_\_\_

Date and jurisdiction of Bar: \_\_\_\_\_ (Jurisdiction)

Memberships outside California: \_\_\_\_\_ (Date admitted)

If any disciplinary action has been taken against you by the State Bar of California, please describe:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

APPLICANT'S INITIALS: \_\_\_\_\_



I have experience in litigating the following case types:

Number of cases taken to trial: \_\_\_\_\_

List panels, boards, or agencies to which you have been admitted to serve as an arbitrator, mediator, or other form of neutral:

- Auto/PI
- Discrimination
- Construction Law
- Probate Law
- Environment Law
- Product Liability
- Medical Malpractice
- Commercial
- Insurance Law
- Wrongful Termination
- Aviation Law
- Corporation/Partnership
- Professional Malpractice
- Bad Faith
- Real Estate Law
- Franchise Law
- Antitrust-Unfair Competition

\_\_\_\_\_  
\_\_\_\_\_

Describe the training you have taken to enable you to perform in a neutral capacity:

\_\_\_\_\_  
\_\_\_\_\_

Provide information on any professional organizations to which you belong, i.e., California Trials Lawyers, Sacramento Bar Association, etc. Also, please provide the categories that you have listed in Martindale Hubbell:

\_\_\_\_\_  
\_\_\_\_\_

List one judicial officer who is familiar with your work and who may be contacted if additional information is required. Please include address and telephone number:

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Court: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

**APPLICANT'S INITIALS:** \_\_\_\_\_



**III. CERTIFICATION OF APPLICANT:**

I hereby certify that I have made full and accurate disclosure of all information requested in this application form. I understand that any false, incomplete, or incorrect statement, regardless of when it is discovered, may result in my disqualification or dismissal from the court approved arbitration panel.

I hereby authorize all my employers and schools to release any and all information concerning me, including information of a confidential and privileged nature. **I HEREBY RELEASE ANY AND ALL EMPLOYERS AND THE SUPERIOR COURT OF CALIFORNIA, COUNTY OF SACRAMENTO, FROM ANY LIABILITY OR DAMAGE WHICH MAY RESULT FROM FURNISHING THE INFORMATION REQUESTED.**

While serving on the court approved arbitration panel, I acknowledge my responsibility to immediately report any disciplinary action taken by the State Bar of California to the ADR Administrator.

My signature below further certifies that to the best of my knowledge I qualify for the position of Arbitrator for the Superior Court of California, County of Sacramento.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**IV. REQUIRED DOCUMENTS:**

- i. Application – Original with signature and date
- ii. Curriculum Vitae

**Return the application and supporting documents to:**

**Arbitration Unit  
Sacramento Superior Court  
720 9<sup>th</sup> Street, Room 101  
Sacramento, CA 95814**