

**APPLICATION FOR MEDIATION PANEL
U.S. DISTRICT COURT - WESTERN DISTRICT OF NEW YORK**

1) Applicant's Full Name: _____

Please contact me at my: Office _____ Home _____

Address: _____ Tel.: _____

_____ Fax: _____

_____ Email: _____

2) Date admitted to practice before:

A) United States District Court
Western District of New York _____ / ____ / _____

B) Appellate Division of the Supreme Court
of the State of New York _____ / ____ / _____

C) The highest court of a State
(if not admitted in New York)

Court: _____ / ____ / _____

3) Are you presently engaged in the active practice of law in the Western District of New York?

Yes _____ No _____ Formerly (last year of practice) _____

4) Check your primary fields of specialization (not more than 3).

- 1. Admiralty _____
- 2. Antitrust _____
- 3. Banking _____
- 4. Civil Rights _____
- 5. Commercial _____
- 6. Consumer _____
- 7. Construction _____

8. Contract _____
9. Copyright & Literary _____
10. Corporation _____
11. Employment _____
12. Entertainment _____
13. Environmental _____
14. ERISA/Pension Funds _____
15. Estate Planning _____
16. General Practice _____
17. Health _____
18. Immigration _____
19. Insurance _____
20. International _____
21. Labor _____
22. Media _____
23. Medical Malpractice _____
24. Municipal _____
25. Patent _____
26. Product Liability _____
27. Real Property _____
28. RICO Act _____
29. Secured Creditors _____
30. Securities _____
31. Sports _____
32. Tax _____
33. Technology/Intellectual Property _____
34. Tort _____
35. Trademark _____
36. Other (please specify) _____

5) State the percentage of your practice that consists of representing:

Plaintiffs: _____ % Defendants: _____ %

6) If you have received training as a mediator within the last five years, set forth for each training the date, the provider, the course title and the number of course hours:

(attach additional sheets, if needed)

7) If you have experience as a mediator, set forth the courts, entities and/or organizations for which you have served as a mediator and the total number of disputes you have mediated in the last two years:

Disputes mediated in last two years: _____

8) I am willing to hear cases in:

Buffalo _____ Rochester _____ Both locations _____

9) I am available to serve on short notice in the event that the mediator originally selected/appointed is not available.

Yes _____ No _____

I HEREBY CERTIFY THAT THE ABOVE
INFORMATION IS TRUE AND CORRECT

(Applicant's Signature)

Date: _____

Return Original Application to:

Barry L. Radlin, Esq., ADR Program Administrator
United States District Court
Western District of New York
United States Courthouse
2 Niagara Square
Buffalo, NY 14202-3350

(Telephone No.: (716) 551-1511)