

**UNITED STATES DISTRICT COURT
Eastern District of New York**

ROBERT C. HEINEMANN
CLERK OF COURT

- PLEASE REPLY TO:
BROOKLYN OFFICE
U.S. COURTHOUSE
225 CADMAN PLAZA EAST
BROOKLYN, NY 11201

- LONG ISLAND OFFICE
U.S. COURTHOUSE
100 FEDERAL PLAZA
CENTRAL ISLIP, NY 11722

Dear Sir/Madam:

Thank you for your interest in becoming a member of the Court Annexed Arbitration Program at the Eastern District of New York. Enclosed/attached is an application for certification as arbitrator. Additional information regarding the ADR program may be found at www.nyed.uscourts.gov/adr.

If you have any questions relating to Arbitration, contact the Arbitration Clerk at 718-613-2325 or email: rita_credle@nyed.uscourts.gov. For matters concerning Mediation, please contact Gerald Lepp at: 718-613-2577 or gerald_p_lepp@nyed.uscourts.gov.

Rita Credle
Arbitration Clerk
(718) 613-2325
rita_credle@nyed.uscourts.gov

**APPLICATION FOR CERTIFICATION AS ARBITRATOR
FORMAT FOR COURT ANNEXED ARBITRATION
U.S. DISTRICT COURT, EASTERN DISTRICT OF NEW YORK
225 Cadman Plaza East
Brooklyn, New York 11201
Web address: www.nyed.uscourts.gov/adr**

(1) Name: _____

Office Address: _____

Office Telephone: _____ Cellular Phone: _____

Email Address: _____

Home Address _____

_____ Home Telephone: _____

(2) Date Admitted to Practice before:

A) Appellate Division of the Supreme Court of the State of New York

B) United States District Court, Eastern District of New York

(3) Date admitted to practice before the highest court of a state other than New York:

(4) Set forth briefly in chronological order, with dates, the nature of your practice of law since admission to the Bar:

(5) Are you presently engaged in the active practice of law in the Eastern District of New York? Yes_____ No_____

(6) State briefly the nature of your present practice:

(7) What percentage of your practice consists of representing:

Plaintiffs_____ Defendants _____

(8) Please list any district judge or U.S. magistrate judge in this district before whom you have appeared who otherwise may have knowledge of your qualifications:

(9) If you have not named any judge of this Court in answer to question no. 8, please list any other federal judges or state judges before whom you have appeared or who may otherwise have knowledge of your qualifications

(10) Have you ever be en disciplined by any Court or Administrative Office of a Court? If yes give details. Yes_____ No_____

(11) Please set forth any additional information you believe would bear upon your

qualifications to serve as an arbitrator. You may attach additional pages if necessary:

(12) Do you understand the compensation limitations for arbitrators appointed under the arbitration Plan and do you agree to accept as full compensation payments within those limits? Yes_____ No_____

(13) If you are certified to be an arbitrator, would you be willing to hear cases at:

Brooklyn_____ Central Islip_____

(14) If you are certified as arbitrator, would you be willing on occasion to serve on short notice in situations where, for some reason, an arbitrator previously appointed is unavailable Yes_____ No_____

I HEREBY CERTIFY THAT THE ABOVE INFORMATION IS TRUE AND CORRECT

(Signature)

Date

Check the Fields of Specialization of your present practice

- Admiralty_____
- Business_____ (Specify) _____
- General Practice _____
- Medical Malpractice_____
- Product Liability _____
- Labor _____
- OTHER: _____ (Specify) _____

The completed application may be sent to:

U.S. District Court, EDNY
225 Cadman Plaza East
Brooklyn, New York 11201
Attention: ADR Department : Telephone: 718-613-2577
Arbitration Clerk: Brooklyn Office : 718-613-2325
Arbitration Clerk: Central Islip Office: 631-712-6047