CIRCUIT COURT OF THE STATE OF OREGON FOR THE COUNTY OF YAMHILL 535 NE 5th Street | McMinnville, OR 97128 | APPLICATION TO SERVE AS ARBITRATOR

Name:		
Last (Print)	First	M.I.
Address:		
Phone: Email:		
Bar No: Date Admitted to B	ar, Any State:	
Law Firm, Partners or Associates:		
Work History (past 10 years):		
Formal Education (Institutions, degrees and major	s, and dates):	
Description of mediation experience and/or trainin	g, including the number of hours:	
Other fields of Training / Experience:		
Principal Areas of Practice:		
Approximate Percentage of Practice Devoted to Any	y Form of Civil Litigation:%	6
Of your civil litigation practice, approximate percen	ntages devoted to each of the followin	g
categories:		
Personal Injury – plaintiff	%	
Personal Injury – defendant	%	
Domestic Relations & Family Law	%	
General Litigation		
 Contracts (excluding collections)	%	
• Collections	%	
• Business torts _	%	
• Real Estate disputes _	%	
• Condemnation	%	
• Other:	%	

Specify any areas from the above list in which you would **NOT** like to serve as arbitrator:

Other languages you speak: _____

References:

Name	Address	Phone

I agree to keep the Yamhill County Circuit Court informed of any changes in my licensure status or qualifications to be a listed Arbitrator. I certify that I have read and will comply with the Oregon Revised Statutes, Uniform Trial Court Rules, and Supplemental Local Rules for Yamhill County that pertain to Arbitration and Alternative Dispute Resolution.

By signing this Arbitrator application, I acknowledge that the information provided may be verified, references/programs may be contacted, and I expressly consent to the release of information.

Date: ______ Signature: _____