## **APPLICATION FOR MEDIATOR CERTIFICATION**

UNITED STATES DISTRICT COURT, SOUTHERN DISTRICT OF FLORIDA (updated: 12/15/23)

First Name

Last Name

This application will be considered pursuant to the certification criteria set forth in and prescribed by S.D. Fla. L.R. 16.2. **Please print, type, or complete form electronically.** 

MI

Mailing Address Email address							
Have you been a member in good standing or more State Bar(s) or the Bar of the Dist	Υ	es	No				
Specify Bar Membership(s) (State or D.C.	):						
Specify Bar Number:							
What year were you admitted to the Sta Columbia indicated in the prior section?	ate Bar(s) or	the Bar of the District of					
List any languages, other than English,	in which you	u are fluent, including Sig	n Lan	quaq	e:		
, J J J ,	, <u>, , , , , , , , , , , , , , , , , , </u>	, 0		<u> </u>			
Member of the Southern District of Florida Bar?							
Are you presently a member in good stand	Y	es	No				
If "yes," year of admission:							
Experience Mediating U.S. District Cou	rt Cases				_		
Have you mediated U.S. District Court cases (excluding cases which you observed or co-mediated as part of your Florida Circuit Court mediation certification process)?					No		
If "yes," how many U.S. District Court cases have you mediated?							
What is the period of time (the inclusive number of U.S. District Court cases indica							
Please list the areas of law in which you he mediated U.S. District Court cases, estimate the percentage in each area:							

Case Name	Court & Case No.	U.S. District Court cases you medi Lawyers' Names, Telephone Numbers & Email Address	Date of Mediation	Subject Matter

During the last 10 years how many U.S. District Court cases (your best estimate) have you been involved in as counsel of record?

During the last 10 years how many U.S. Bankruptcy Court cases (your best estimate) have you been involved in as counsel of record?

If you have had substantial experience as counsel of record in matters pending in any U.S. District or Bankruptcy Court, please indicate the areas of your experience by checking the box next to each area listed below in which you have such experience.

CONTRACT	TO	RTS	FORFEITURE/PENALTY	BANKRUPTCY	OTHER STATUTES
	5/05 - 5/00/04/45/05/5/05 - 54/16/45/65/54 - 7/04/4		and the statement account to the statement and t		
☐ 110 Insurance	PERSONAL INJURY	PERSONAL INJURY	☐ 625 Drug Related Seizure	☐ 422 Appeal 28 USC 158	☐ 375 False Claims Act
☐ 120 Marine	☐ 310 Airplane	365 Personal Injury -	of Property 21 USC 881	☐ 423 Withdrawal	☐ 400 State Reapportionment
☐ 130 Miller Act	315 Airplane Product	Product Liability	☐ 690 Other	28 USC 157	☐ 410 Antitrust
140 Negotiable Instrument	Liability	367 Health Care/			430 Banks and Banking
150 Recovery of Overpayment	☐ 320 Assault, Libel &	Pharmaceutical		PROPERTY RIGHTS	☐ 450 Commerce
& Enforcement of Judgment	Slander	Personal Injury		☐ 820 Copyrights	☐ 460 Deportation
☐ 151 Medicare Act	☐ 330 Federal Employers'	Product Liability		☐ 830 Patent	☐ 470 Racketeer Influenced and
☐ 152 Recovery of Defaulted	Liability	☐ 368 Asbestos Personal		☐ 840 Trademark	Corrupt Organizations
Student Loans	☐ 340 Marine	Injury Product			☐ 480 Consumer Credit
(Excl. Veterans)	☐ 345 Marine Product	Liability	LABOR	SOCIAL SECURITY	☐ 490 Cable/Sat TV
☐ 153 Recovery of Overpayment	Liability	PERSONAL PROPERTY	☐ 710 Fair Labor Standards	☐ 861 HIA (1395ff)	☐ 850 Securities/Commodities/
of Veteran's Benefits	☐ 350 Motor Vehicle	☐ 370 Other Fraud	Act	☐ 862 Black Lung (923)	Exchange
☐ 160 Stockholders' Suits	☐ 355 Motor Vehicle	☐ 371 Truth in Lending	☐ 720 Labor/Mgmt. Relations	☐ 863 DIWC/DIWW (405(g))	☐ 890 Other Statutory Actions
■ 190 Other Contract	Product Liability	☐ 380 Other Personal	☐ 740 Railway Labor Act	☐ 864 SSID Title XVI	☐ 891 Agricultural Acts
■ 195 Contract Product Liability	☐ 360 Other Personal	Property Damage	☐ 751 Family and Medical	☐ 865 RSI (405(g))	☐ 893 Environmental Matters
☐ 196 Franchise	Injury	☐ 385 Property Damage	Leave Act		☐ 895 Freedom of Information
	☐ 362 Personal Injury -	Product Liability	☐ 790 Other Labor Litigation		Act
	Med. Malpractice	**************************************	☐ 791 Empl. Ret. Inc.	85	☐ 896 Arbitration
REAL PROPERTY	CIVIL RIGHTS	PRISONER PETITIONS	Security Act	FEDERAL TAX SUITS	☐ 899 Administrative Procedure
☐ 210 Land Condemnation	☐ 440 Other Civil Rights	☐ 510 Motions to Vacate		☐ 870 Taxes (U.S. Plaintiff	Act/Review or Appeal of
☐ 220 Foreclosure	☐ 441 Voting	Sentence		or Defendant)	Agency Decision
☐ 230 Rent Lease & Ejectment	☐ 442 Employment	Habeas Corpus:		☐ 871 IRS—Third Party	☐ 950 Constitutionality of
240 Torts to Land	☐ 443 Housing/	☐ 530 General		26 USC 7609	State Statutes
245 Tort Product Liability	Accommodations	☐ 535 Death Penalty	IMMIGRATION	SACHELONIA DELLA GILLOUISI	St. BOOKING TO J. CO. ON DOCKING STATES.
☐ 290 All Other Real Property	☐ 445 Amer. w/Disabilities -	☐ 540 Mandamus & Other	462 Naturalization Application	1	
* (2)	Employment	☐ 550 Civil Rights	☐ 463 Habeas Corpus -		
	☐ 446 Amer. w/Disabilities -	☐ 555 Prison Condition	Alien Detainee		
	Other	☐ 560 Civil Detainee -	(Prisoner Petition)		
	☐ 448 Education	Conditions of	☐ 465 Other Immigration		
		Confinement	Actions		
		Commentent	710HOH3		l

Experience Mediating State Circuit Court Cases						
How many state circuit court cases have you mediated?						
What is the period of time (the inclusive years) during which you mediated the number of state circuit court cases indicated above?						
Please list the areas of law in which you have mediated state circuit court cases, estimating the percentage in each area:						

Case Name	Court & Case No.	State cases you mediated:  Lawyers' Names, Telephone Numbers & Email Address	Date of Mediation	Subject Matter

Experience Mediating Pre-Suit Dispu	ites					
Have you mediated disputes prior to liti	gation being commenced?		Yes		No	If yes, how many pre-litigation disputes?
What is the period of time (the inclusive of pre-suit disputes indicated above?	years) during which you med	diat	ted the	nun	nber	
Please list the areas of law in which yo	u have mediated pre-suit disp	oute	es, estin	nati	ing th	ne percentage in each area:
List the following information for the las  Names of Mediation Participants	t 5 pre-suit disputes you med Lawyers' Names, Telephone Nui			r	Date of	Mediation Subject Matter
	Email Address					

Certification as a Florida Circuit Court Mediator								
Have you been certified as a cir Court?	cuit court mediator by the F	lorida Supreme	Y	'es	No			
If yes:				•				
Certification Date Certification Number Expiration Date								
Business Affiliations and Add	dresses For Last 10 Years							
<b>Current Professional Status</b>								
Please describe your current pr	rofessional status:							
Practicing attorney	Full-time mediator	Engage	ed in ot	her ve	enture			
If engaged in some venture oth	er than practicing law or se	rving as a med	iator, p	lease	explain:			
	Full time a	Dowt tim						
If you are practicing law, is it : Full-time Part-time?								
What percentage of your practice is devoted to trials?								
vvnat percentage of your practi	What percentage of your practice is devoted to serving as a mediator?							

Have you ever been the subject of an your professional conduct as a member licensing agency wherein there was a	Yes	No				
If yes, please provide the details of all	such inquiries or compla	ints, including	:			
Licensing Agency	Date	Ultima	ate Dispo	sition		
				1 141 1		

**Disciplinary History** 

Conditions for Certification	Initials
In order to become certified as a mediator in the United States District Court for the Southern District of Florida, you must agree to accept at least two mediation assignments per year in cases where at least one party lacks the ability to compensate the mediator.	
Acknowledge your agreement by initialing in the box:	
In order to become certified as a mediator in the United States District Court for the Southern District of Florida, you must agree, if designated by the Clerk of the Court on a blind, random basis to serve as a mediator in a case, you will mediate any such case and agree to be compensated at the rate provided by Administrative Order 2018-34 (Three Hundred Fifty Dollars (\$350) per hour, which includes the mediator's time preparing for and conducting the mediation, and without compensation for travel time)?  Acknowledge your agreement by initialing the box:	

C	Counties In Which You Are Willing To Mediate Without Compensation for Travel:									
	Please check the box next to each county in which you are willing to conduct mediation without compensation for travel.									
	Broward Highlands Indian River Martin Miami-Dade									
	Monroe	Okeechobee		Palm Beach		St. Lucie				

References								
Please provide the following information for 2 attorneys who are members of the Bar of the Southern District of Florida who can attest to your good moral character and your experience, either as a lawyer or mediator, in matters brought in any U.S. District or Bankruptcy Court.								
Name	Address		lephone Number & Email Address					
Please provide any additional considering you application:	al information which you feel th	ne Commi	ttee should review when					
Previous Applications:								
	r certification in the USDC of the Sen and which district(s)? YES $\Box$							
Acknowledgement:								
Before proceeding to complete the application, please acknowledge that you have reviewed the certification criteria set forth in and prescribed by S.D. Fla. L. R. 16.2.								
Signature:		Date:						

Signature and Certification						
In accordance with 28 U.S.C.§1746, I certify under penalty of perjury that the foregoing is true and correct.						
Signature:		Date:				

This application should be emailed to Clerk of Court, United States District Court, Southern District at mediation\_flsd@flsd.uscourts.gov.

**Please note:** Illegible applications may be returned without review or consideration by the Committee charged with reviewing applications of prospective mediators and recommending certification to the Chief Judge as appropriate.