## Application for Initial Certification as Arbitration Panelist

(Please print or type)

| NAME                    |                    | SOCIAL SECURITY NO.                |  |
|-------------------------|--------------------|------------------------------------|--|
| HOME ADDRESS            | PRINCIPAL BUS      | RINCIPAL BUSINESS ADDRESS          |  |
|                         | BUSINESS TELEPHONE |                                    |  |
| ATTORNEY STATE I.D. NO. | DATE OF ADMIS      | SION TO PENNSYLVANIA SUPREME COURT |  |

I hereby certify that I have been admitted to the Bar of the Court for one year, have tried at least one civil case in any forum in Pennsylvania, am currently engaged in the active practice of law and maintain my principal office in Philadelphia.

I further certify that I attended the Court-approved Seminar in Arbitration Practices and Procedure on \_\_\_\_\_\_.

If my status is changed in regard to any of the above, I will immediately contact the Court of Common Pleas, Arbitration Center, and ask that my name be removed from the certified list of arbitrators.

(a) My practice primarily consists of representing defendants.

(b) My practice primarily consists of representing plaintiffs.

 $\Box$  (c) My practice cannot be designated as either (a) or (b).

Are you available to sit as an emergency arbitrator?  $\Box$  Yes  $\Box$  No

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

Signature

Note: See Rule  $\pm 1302$