UNITED STATES DISTRICT COURT DISTRICT OF SOUTH CAROLINA

Application for Mediators

Please complete the entire application, using additional paper if necessary. You	ou may also attach a resume.
Name:	
Firm or Office Name:	
Office Address:	
Office Phone: Office Fax:	
E-mail Address:	
ADMISSIONS AND AFFILIATIONS	
Date admitted to the Bar of the District of South Carolina:	I.D. No.:
Date admitted to the South Carolina Bar:	Bar No.:
Other courts or jurisdictions to which admitted (with dates of admission and ba	r nos.):
Membership and positions held in bar, ADR and professional associations:	
Are you a member in good standing in each jurisdiction where admitted to prac	tice law? yesno
Have you, within the last five years, been publicly reprimanded or publicly disc no	ciplined for professional conduct?
Have you, within the last five years, been denied admission to a bar for character disbarred/suspended from the practice of law? yesno	er or ethical reasons, or been
EDUCATION	
Year law degree received Law School	
Other professional degrees received (including year and school):	
LEGAL EXPERIENCE (A minimum of five years of law practice required)	

LEGAL EXPERIENCE (A minimum of five years of law practice required)

Summarize legal experience (including teaching) since admission to the bar, particularly in the past five years:

		tiff% or defense%			
'ercentage of Federal or State of	court practice in last 5 ye	ears: Federal% State9	%		
Number of years engaged in ac	tive litigation:	_			
SUBSTANTIVE EXPERIE	NCE				
areas in which you have ex	xperience. (Do not i	ence. Place a "1" by your stro rank beyond "1" and "2.") A e.g. "medical malpractice" after Pe	fter any category y		
Admiralty	Security	or Shareholders suits			
Antitrust	Labor	or Saurementers Sum			
Contracts	ERISA				
Environment	Wrongfi	Wrongful Termination			
Fraud or Civil RICO		ghts in Employment			
Insurance		ivil Rights			
Miller Act	Copyrig	hts			
Personal Injury	Patent				
Product Liability	Tradema	ark			
Other (specify)					
MEDIATION EXPERIENCE Mediation experience (particula		categories above):			
Other courts or organizations fo	or whom you serve as a	mediator (please note any certifica	tions):		
		mediator (please note any certification) Number of other ADR session			
Number of mediations conducte	ed:				
Other courts or organizations for Number of mediations conducted MEDIATION AND OTHER Course	ed:			No. of	
Number of mediations conducted MEDIATION AND OTHER Course	ed:			No. of Hours	
Number of mediations conducted MEDIATION AND OTHER	ed: R ADR TRAINING Course	Number of other ADR session	s conducted:		
Number of mediations conducted MEDIATION AND OTHER Course	ed: R ADR TRAINING Course	Number of other ADR session	s conducted:		
Number of mediations conducted MEDIATION AND OTHER Course	ed: R ADR TRAINING Course	Number of other ADR session	s conducted:		

OTHER INFORMATION			
Are you familiar with the sta		overning alternative dispute	resolution in the District of South
Other relevant experience or s	skills or other information y	ou would like considered in	n connection with this application:
Cities in which you are available	e to conduct mediation:		_
Columbia	Charleston	Greenville	Florence
Other			
Fees charged:			
Hourly Rate: \$	Minimum charge each	mediation:\$	
How do you bill for travel? (exp	plain):		
Rules for Lawyer Disciplinary the District Court; (2) Provide	Enforcement, Rule 413, S e mediation to indigents with irector of any change in the	outh Carolina Appellate Cou hout pay if ordered by the above facts or otherwise in	arolina Appellate Court Rules; the art Rules; and the Local Rules of Court; (3) Notify the Alternative my ability to perform duties as members of the public.
I certify that the foregoing is tru	e and correct.		
	St		D.
	Signature:	Applicant	Date:
	Danny H. l Alternative Dispu United State Post Of	eted application to: Mullis, Director te Resolution Program es District Court fice Box 835 SC 29402-0835	
	Reviewed:AI	OR Program	Date:
Approve	d:		Date:
	U	.S. District Judge	