

APPLICATION FORM LAW SOCIETY OF IRELAND PANEL OF ARBITRATORS

name:		_
Name of firm:		_
Address:		_
Tel. No:	fax no	_
E-mail address	s:	_
Date of birth:		_
	age qualifications:	
Professional q	ualification(s):	
admission to e	body/bodies you're currently a member of, please include da each body:	
	ntly a member in good standing with your professional body/bodies	
Are you currer	ntly a member of the Chartered Institute of Arbitrators:	

What	t experience do you have of:
(a) a	cting as an arbitrator?
(b) re	epresenting a party in arbitration proceedings?
•	u have been appointed an arbitrator in the last five years please state:- e number of such appointments:
	ne number of arbitrations which you were appointed arbitrator which:-
	(a) were concluded by an award being made:
	(b) were settled:
	(c) remain to be resolved:
Area	s of speciality:

I hereby declare that if appointed as arbitrator in any matter pursuant to admission				
the panel of arbitrate	ors that I agree to com	in any matter pursuant to admissic ply, in all respects, with the cod and any guidelines laid down from		

<u>Note</u>

The applicant must submit, with this application form, a separate one page curriculum vitae (CV) detailing the applicant's experience and expertise. The applicant agrees that this CV may be furnished to anyone considering using the applicant's services as an arbitrator. It is the applicant's responsibility to ensure that the CV is kept up to date following its initial submission.