APPENDIX B

APPLICATION

UNITED STATES BANKRUPTCY COURT
DISTRICT OF CONNECTICUT

The undersigned _____, with an office address of _____ _____, hereby applies to the United States Bankruptcy Court for the District of Connecticut for permission to serve as a volunteer mediator and for his or her name to be entered on the Register of Voluntary Mediators maintained by the Clerk of the Bankruptcy Court in Hartford. The undersigned certifies to the Court that he or she has read Chamber's Order _____ of said Court and is qualified to serve in accordance with the requirements of Chamber's Order _____ .

Name: _____

Address: _____
Street City State Zip

1. I was admitted to practice before the courts of the State of Connecticut on _____. (Date of admission must be seven or more years prior to the date of this Application).

2. My Connecticut State Juris Number is _____ .

3. I was admitted to practice before the United States District Court for the District of Connecticut on _____. (Date of admission must be six or more years prior to the date of this Application).

4. Have you served as the attorney of record for at least three (3) bankruptcy cases from commencement through conclusion (i.e., confirmation of a plan or discharge)? Yes_____ . No_____ .

5. If the answer to question 4 above is "No," have you served as the attorney of record for at least five (5) adversary proceedings or contested matters in Bankruptcy Court from commencement through completion (i.e., judgment, order or stipulation settlement)? Yes _____ . No_____ .

6. Have you completed not less than four (4) credit hours of Continuing Legal Education on the subject of mediation and/or alternative dispute resolution? Yes_____. No_____ .

7. If the answer to question 6 above is "No", will you complete not less than four (4) credit hours of Continuing Legal Education on the subject of mediation and/or alternative dispute resolution within one (1) year from the date of your appointment as a volunteer for mediator if your Application is accepted? Yes_____ . No _____ .

8. Have you ever been suspended from the practice of law or had a professional license revoked? Yes _____ . No _____ .

9. Is there now pending any disciplinary proceeding against you? Yes _____ . No _____ .

10. Have you ever resigned from any applicable professional organization or voluntarily relinquished your right to practice law in any jurisdiction while an investigation into allegations of misconduct which would warrant suspension, disbarment or professional license revocation was pending? Yes _____ . No _____ .

11. Have you ever been convicted of a felony? Yes _____ . No _____ .

_____
Signature

This Application should be submitted **IN DUPLICATE** to:

THE HARTFORD COUNTY BAR ASSOCIATION
COMMERCIAL LAW COMMITTEE
179 ALLYN STREET, SUITE 210
HARTFORD, CT 06103-1429

TO BE COMPLETED BY AUTHORIZED MEMBER OF THE COMMERCIAL LAW COMMITTEE OF THE HARTFORD COUNTY BAR ASSOCIATION.

I hereby certify that the Commercial Law Committee of The Hartford County Bar Association has reviewed the foregoing Application and has determined that the Applicant meets the qualifications, subject to Court Approval, for inclusion on the Register of Qualified Volunteer Mediators maintained by the Clerk of the Bankruptcy Court in Hartford. This qualification is:

unconditional _____
valid for one year _____ .

Dated: _____

_____
Name