



ESTABLISHED 1934

# Oakland County Circuit Court Case Evaluation

**Application for the  
Selection of Case Evaluators**

\_\_\_\_\_ Orientation  
\_\_\_\_\_ Comm. Approval  
\_\_\_\_\_ Type  
\_\_\_\_\_ Specialty Panel

## OAKLAND COUNTY CIRCUIT COURT CASE EVALUATOR APPLICATION

**To serve as a case evaluator in the Oakland County Circuit Court, a candidate must meet the following minimum qualifications:**

- 1) A candidate must have been licensed to practice law in the State of Michigan for at least five (5) years.
- 2) A candidate must be a member in good standing of the State Bar of Michigan.
- 3) A candidate must reside, maintain an office, or have an active practice in Oakland County.
- 4) A candidate must have attended a case evaluator training seminar offered by the Oakland County Bar Association.
- 5) An applicant must demonstrate that a substantial portion of the applicant's practice for the last 5 years has been devoted to civil litigation matters, including investigation, discovery, motion practice, mediation, case evaluation, settlement, trial preparation and/or trial.
- 6) An applicant must demonstrate an active practice for the last 3 years in the areas of medical malpractice, product liability, labor and employment, or complex commercial to qualify for those sublists.
- 7) A candidate shall have made application for inclusion on a case evaluator list to the Oakland County Bar Association on an application approved by the Oakland County Bar Association and the Oakland County Circuit Court Bench.
- 8) A candidate's application shall have been approved by the Oakland County Bar Association's Circuit Court Case Evaluator Committee.
- 9) Separate Case Evaluator Lists will be compiled and maintained in the areas of personal injury/negligence, commercial litigation, medical malpractice, product liability, labor and employment litigation, and complex commercial litigation.

*Accepted applicants shall be placed on the list of case evaluators for 5 years, and must reapply at the end of that time to again become eligible to serve as a case evaluator. MCR 2.404(B)(5)*

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1. Name \_\_\_\_\_ P# \_\_\_\_\_
  2. Current employer's firm name \_\_\_\_\_ Dates of Employment \_\_\_\_\_  
Business address \_\_\_\_\_
  3. Business telephone number \_\_\_\_\_ Home telephone number \_\_\_\_\_  
Fax number \_\_\_\_\_ e-Mail address \_\_\_\_\_
  4. Previous employer's firm name \_\_\_\_\_ Dates of Employment \_\_\_\_\_  
Business address \_\_\_\_\_
  5. County of residence \_\_\_\_\_
  6. Is this a:     new application     renewal
  7. Year admitted to the State Bar of Michigan \_\_\_\_\_ Years in practice \_\_\_\_\_
  8. Are you currently a member in good standing of the State Bar of Michigan? \_\_\_\_\_
  9. Have you ever been disciplined by the Michigan Attorney Discipline Board or any other state or federal agency or court? \_\_\_\_\_ If so, explain:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

10. Provide information that demonstrates experience in civil litigation including investigation, discovery, motion practice, mediation, case evaluation, settlement, trial preparation, and/or trial for the last 5 years. For any trial experience, include the name of the case, the year of the trial, the case number, the number of trial days, the name of the court, the name of the judge, and whether you represented the plaintiff or the defendant. Complete separate pages if necessary.

Case Name	Year of Trial	Case #	Court	Judge	Opposing Counsel	Represented Plf./Def.

11. Indicate the percent of your law practice for the past 5 years devoted to civil litigation matters, including investigation, discovery, motion practice, mediation, case evaluation, settlement, trial preparation, and/or trial: \_\_\_\_\_%

Indicate the percentage of your current practice in the following areas:

- Personal Injury / Negligence                    \_\_\_\_\_ % plaintiff    \_\_\_\_\_ % defendant
- Medical Malpractice                            \_\_\_\_\_ % plaintiff    \_\_\_\_\_ % defendant
- Product Liability                                \_\_\_\_\_ % plaintiff    \_\_\_\_\_ % defendant
- Commercial                                      \_\_\_\_\_ % plaintiff    \_\_\_\_\_ % defendant
- Labor and Employment                        \_\_\_\_\_ % plaintiff    \_\_\_\_\_ % defendant
- Complex Commercial                          \_\_\_\_\_ % plaintiff    \_\_\_\_\_ % defendant
- Condemnation                                  \_\_\_\_\_ % plaintiff    \_\_\_\_\_ % defendant
- Other \_\_\_\_\_ *specify*                        \_\_\_\_\_ % plaintiff    \_\_\_\_\_ % defendant
- Other \_\_\_\_\_ *specify*                        \_\_\_\_\_ % plaintiff    \_\_\_\_\_ % defendant

12. Indicate which you primarily represent:     Plaintiff         Defendant  
 Neutral (not representing a majority of either)

13. A case evaluator may serve on panels in only one category. You must demonstrate an active practice for the last three years in the areas of medical malpractice, product liability, labor and employment, or complex commercial to qualify for those sublists. Indicate the panel(s) you are applying for:

**Category #1**

- Personal Injury / Negligence
- Medical Malpractice
- Product Liability

**Category #2**

- Commercial
- Labor and Employment
- Complex Commercial

14 List the areas of law in which you practice and how long you have practiced in each area:

- Area of Law \_\_\_\_\_ # of Years Practiced \_\_\_\_\_
- Area of Law \_\_\_\_\_ # of Years Practiced \_\_\_\_\_
- Area of Law \_\_\_\_\_ # of Years Practiced \_\_\_\_\_
- Area of Law \_\_\_\_\_ # of Years Practiced \_\_\_\_\_

15. Have you previously served as a case evaluator, mediator or arbitrator? \_\_\_\_\_
16. If so, please identify the forum, location and nature of case(s) heard, the frequency of service, and whether you served as plaintiff, defendant, or neutral case evaluator, mediator or arbitrator:

\_\_\_\_\_  
\_\_\_\_\_

17. Provide any additional information about you which would be helpful in describing your qualifications to serve as case evaluator, for example, teaching law school courses. Complete on separate pages if necessary.

\_\_\_\_\_  
\_\_\_\_\_

18. References

Attorney: \_\_\_\_\_ Phone \_\_\_\_\_

Attorney: \_\_\_\_\_ Phone \_\_\_\_\_

Judicial: \_\_\_\_\_ Phone \_\_\_\_\_

The undersigned agrees to notify the Oakland County Bar Association promptly in writing of any changes in the above information. The undersigned authorizes representatives of the Oakland County Bar Association to contact references, opposing counsel, judges, and any other person whomsoever to discuss the undersigned's qualifications to serve as an Oakland County Circuit Court Case Evaluator, and agrees to hold all persons contacted as references harmless from any liability in connection with the provision of information to the Bar Association regarding the undersigned's qualification. The undersigned recognizes that the Oakland County Bar Association, pursuant to the court rule, has agreed to assist the Circuit Court in the selection of case evaluators and hereby agrees to hold the Association, its directors, employees, and members of the mediator selection panel harmless from any liability in connection with the establishment of the list of approved case evaluators. The undersigned acknowledges that the submission of this application to the Bar Association and the Bar Association approval of the application create no contract or express or implied promise that the applicant will be selected as a case evaluator.

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**CERTIFICATION**

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I certify that I meet the requirements for service under the court's selection plan, and that I will not discriminate against parties, attorneys, or other case evaluators on the basis of race, ethnic origin, gender, or other protected personal characteristic.

Signature \_\_\_\_\_

Dated \_\_\_\_\_

*Completed applications should be sent to:* Circuit Court Case Evaluation Committee  
Oakland County Bar Association  
1760 S. Telegraph Road, Suite 100  
Bloomfield Hills, MI 48302-0181