



**OFFICE OF COURT ADMINISTRATION
43RD JUDICIAL DISTRICT
MONROE COUNTY COURTHOUSE
610 MONROE STREET, SUITE 221
STROUDSBURG, PA 18360
(570) 517-3009
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**John J. Goldner
District Court Administrator**

**Deborah Rivera
Deputy Court Administrator**

**APPLICATION FOR CERTIFICATION AS
ARBITRATION PANELIST**

NAME: _____ DATE: _____

HOME ADDRESS: _____

HOME TELEPHONE NUMBER: _____ CELL: _____

PRINCIPLE BUSINESS ADDRESS: _____

OFFICE NUMBER: _____

ATTORNEY I.D. NUMBER: _____

DATE OF ADMISSION TO PENNSYLVANIA SUPREME COURT: _____

DATE OF ADMISSION TO MONROE COUNTY BAR: _____

FIRM NAME: _____

(Please attach a list of all lawyers who are associated with you)

I hereby certify that I am currently engaged in the active practice of law. I am an active member of the Monroe County Bar Association and I am familiar with local rules of practice in Monroe County. I will immediately notify Court Administration of any change in the status of my Monroe County Bar Association membership or with whom I practice or am associated.

Signature