



HEARING OFFICER QUESTIONNAIRE (EMPLOYMENT)

Name: _____

*Bench: _____

Business Address: _____ _____ _____	Personal Address: _____ _____ _____
Telephone: _____	Telephone: _____
Fax: _____	Fax: _____

*Email Address: _____

Social Security Number: _____

Federal Tax Number: _____

Indicate your areas of expertise: (check as many as apply)

- | | | |
|---|---|---|
| <input type="checkbox"/> Affirmative Action | <input type="checkbox"/> Executive Employment Law | <input type="checkbox"/> Personnel Policies |
| <input type="checkbox"/> Age Discrimination | <input type="checkbox"/> Executive Severance Contracts | <input type="checkbox"/> Prevailing Wage Litigation |
| <input type="checkbox"/> Civil Service | <input type="checkbox"/> Executive Transfers | <input type="checkbox"/> Retaliatory Discharge |
| <input type="checkbox"/> Collective Bargaining | <input type="checkbox"/> Fair Employment Practices | <input type="checkbox"/> Sexual Harassment |
| <input type="checkbox"/> Employee Discipline | <input type="checkbox"/> Fair Labor Standards | <input type="checkbox"/> Title VII Discrimination |
| <input type="checkbox"/> Employee Drug Testing | <input type="checkbox"/> Family & Medical Leave Act | <input type="checkbox"/> Unfair Labor Practices |
| <input type="checkbox"/> Employee Leasing | <input type="checkbox"/> Federal Employment Law | <input type="checkbox"/> Union Contract Negotiation |
| <input type="checkbox"/> Employee Privacy | <input type="checkbox"/> Harassment | <input type="checkbox"/> Union Elections |
| <input type="checkbox"/> Employer International Torts | <input type="checkbox"/> International Employment Contracts | <input type="checkbox"/> Union Labor Law |
| <input type="checkbox"/> Employer Liability | <input type="checkbox"/> International Labor Law | <input type="checkbox"/> Union Organization |
| <input type="checkbox"/> Employer Rights | <input type="checkbox"/> Labor Antitrust | <input type="checkbox"/> Wage & Hour Law |
| <input type="checkbox"/> Employer Breach of Contract | <input type="checkbox"/> Labor Arbitration | <input type="checkbox"/> WARN Act |
| <input type="checkbox"/> Employment Civil Rights | <input type="checkbox"/> Labor Law | <input type="checkbox"/> Whistleblower Litigation |
| <input type="checkbox"/> Employment Contracts | <input type="checkbox"/> Labor Legislation | <input type="checkbox"/> Workplace Violence |
| <input type="checkbox"/> Employment Discrimination | <input type="checkbox"/> Labor Relations | <input type="checkbox"/> Wrongful Termination |
| <input type="checkbox"/> Employment Law | <input type="checkbox"/> Labor Strikes | |
| <input type="checkbox"/> Employment Litigation | <input type="checkbox"/> Management Labor Law | |
| <input type="checkbox"/> Employment Mediation | <input type="checkbox"/> National Labor Relations Act | |
| <input type="checkbox"/> Employment Rights | <input type="checkbox"/> Negligent Hiring | |
| <input type="checkbox"/> Equal Employment Opportunity Law | <input type="checkbox"/> Outsourcing | |

Hearing Officer Questionnaire (Employment)

If there are one or two areas in which you have particularly strong expertise, please provide specifics:

Have you ever served as an Arbitrator or Mediator? Yes No

If yes, where: _____

With what company: _____

Do you have access to an office for hearings? Yes No

If yes, where: _____

Have you received formal training in ADR? Yes No

If yes, please list and/or attach a copy of certification:

Judicial/Legal Experience: _____

Professional Affiliations/Associations: _____

Hearing Officer Questionnaire (Employment)

Education: _____

While a **Curriculum Vitae** is preferred – if not available, please provide the following information:

Law School Attended: _____ Graduation Date: _____