

Accountancy	Contracts	Insurance	Petroleum/oil
Administration	Counselling	International Trade	Pharmaceutical
Agriculture	Engineering	International Organizations	Probate and succession
Architecture	electrical	Internet Sector	Publishing
Aviation	Environment	Labour/Employment	Real estate
Banking/finance	Estates, Trusts and Probate	Land/Property	Retrial/consumer
Bankruptcy	Family	Law	Tourism/leisure
Business/commercial/corporate	Government	Maritime/Shipping	Transport/freight
Chemical	Information Technology	Medical	Other: (Please indicate)
Community sector	(Hardware/Networks	Mechanical	
	Information Technology (Software)	Motor Trade	
		Non- governmental organizations	
20. Are you currently participating in any ADR program () Yes () No			
21. Are you or have you been involved in any community or volunteer activities relating to ADR () Yes () No			
22. Please indicate the communities or organisations with which you are or have been involved, please state the address and telephone numbers			
23. what role did you play in these activities/organization and for how long			
24. may we contact these organization () Yes (No)			
25. Explain situations in you personal or professional life in which you have assisted in resolving dispute: please give details on separate sheet			
26. how did you hear about the Delta Multi-Door Courthouse			
27. What is your understanding of the role of an ADR Neutral			
28. Are you willing to volunteer your time in service to the Delta Multi-Door Courthouse			
29. As a member of our Panel of Neutrals, you may be asked from time to time to take up a Pro Bono Matter. Are you Willing to participate in the Pro Bono scheme? () Yes () No			
I hereby confirm that I have read this and declare that this form and all the information supplied by me are true, if selected to the Panel of Neutrals, I undertake to abide by the Rules, Regulations, Codes of Ethics and Code of Conduct of the DMDC			
ATTESTATION CONFIRMATION			
Name:		Signature	Date
DMDC ADMINISTRATION:			
Chairman Screening and selection Communities ()			
Remarks on			
Application: _____			
Application Approved _____		Application Disapproved _____	

Signature _____ Date _____			