



San Francisco-Marin  
LAWYER REFERRAL AND  
INFORMATION SERVICE

THE BAR ASSOCIATION OF SAN FRANCISCO

**Lawyer Referral and Information Service**

50 Fremont Street, Suite 1700

San Francisco, CA 94105

Telephone: (415) 477-2374

Fax: (415) 477-2389

<http://www.sfbar.org>

**APPLICATION FOR  
DISABILITY RIGHTS PANEL**

*(Please complete the application to the extent possible if applying under Rule 6 below)*

Name: \_\_\_\_\_

State Bar number: \_\_\_\_\_

Telephone: \_\_\_\_\_

Fax: \_\_\_\_\_

E-mail address: \_\_\_\_\_

San Francisco office address: \_\_\_\_\_

Marin County office address: \_\_\_\_\_

Main address (if not in SF/Marin, please provide your address recorded with the State Bar of California):

\_\_\_\_\_  
(office number and street)

\_\_\_\_\_  
(suite #)

\_\_\_\_\_  
(zip)

\* If applicant's main office is outside of San Francisco or Marin Counties, they are encouraged to provide qualifying matters or filings in San Francisco or Marin. At their discretion, the LRIS Director and the LRIS Qualifications Sub-Committee may request information about provided experience and/or peer references on any panel application.

Number of years of continuous active practice in California: \_\_\_\_\_

Please check all that apply: I am applying for the  San Francisco panel /  Marin County panel

Substantial Equivalent Experience - Under Rule 6: If you cannot meet the following requirements for panel membership, but believe that you qualify by reason of substantial, equivalent experience, you may submit an outline of such experience, as provided for in Rule 6 of the Lawyer Referral and Information Service Rules.

**For Classes 1 and 2**, applicant must have **a)** completed three disability discrimination matters within the last five years through alternative dispute resolution in EACH class, and **b)** completed ANY two Federal or State (civil or criminal) bench trials through judgment, within the last seven years **OR c)** completed three disability discrimination matters through binding arbitration, within the last seven years.

**For Class 3**, applicant must have completed three disability discrimination matters within the last five years involving education access and accommodations, two of which were resolved at an Administrative Law Judge hearing.

**Class 1 - Public Accommodations Access (e.g. architectural barriers in public housing, transportation, hotels, businesses, etc.)**

**Three (3) Discrimination Matters:**

1. Case Name: \_\_\_\_\_ Dates of representation: \_\_\_\_\_

County/Case #/Court: \_\_\_\_\_

Nature of case: \_\_\_\_\_

Resolution: \_\_\_\_\_

2. Case Name: \_\_\_\_\_ Dates of representation: \_\_\_\_\_

County/Case #/Court: \_\_\_\_\_

Nature of case: \_\_\_\_\_

Resolution: \_\_\_\_\_

3. Case Name: \_\_\_\_\_ Dates of representation: \_\_\_\_\_

County/Case #/Court: \_\_\_\_\_

Nature of case: \_\_\_\_\_

Resolution: \_\_\_\_\_

**Class 2 - Employment Discrimination/Reasonable Accommodations**

**Three (3) Discrimination Matters:**

1. Case Name: \_\_\_\_\_ Dates of representation: \_\_\_\_\_

County/Case #/Court: \_\_\_\_\_

Nature of case: \_\_\_\_\_

Resolution: \_\_\_\_\_

2. Case Name: \_\_\_\_\_ Dates of representation: \_\_\_\_\_

County/Case #/Court: \_\_\_\_\_

Nature of case: \_\_\_\_\_

Resolution: \_\_\_\_\_

3. Case Name: \_\_\_\_\_ Dates of representation: \_\_\_\_\_

County/Case #/Court: \_\_\_\_\_

Nature of case: \_\_\_\_\_

Resolution: \_\_\_\_\_

**AND**

**Two (2) Federal or State bench trials through judgment OR Three (3) completed disability rights matters through binding arbitration OR a combination of both for a total of five matters to bench trial or binding arbitration, within the last seven years:**

**Two (2) Federal or State bench trials through judgment OR:**

1. Case Name: \_\_\_\_\_ Trial Date and Judge: \_\_\_\_\_

County/Case #/Court: \_\_\_\_\_

Nature of case: \_\_\_\_\_

Judgment or other resolution: \_\_\_\_\_ Counsel for: \_\_\_\_\_

2. Case Name: \_\_\_\_\_ Trial Date and Judge: \_\_\_\_\_

County/Case #/Court: \_\_\_\_\_

Nature of case: \_\_\_\_\_

Judgment or other resolution: \_\_\_\_\_ Counsel for: \_\_\_\_\_

**Three (3) matters through binding arbitration:**

1. Case Name: \_\_\_\_\_ Trial Date and Judge: \_\_\_\_\_

County/Case #/Court: \_\_\_\_\_

Nature of case: \_\_\_\_\_

Judgment or other resolution: \_\_\_\_\_ Counsel for: \_\_\_\_\_

2. Case Name: \_\_\_\_\_ Trial Date and Judge: \_\_\_\_\_

County/Case #/Court: \_\_\_\_\_

Nature of case: \_\_\_\_\_

Judgment or other resolution: \_\_\_\_\_ Counsel for: \_\_\_\_\_

County/Case #/Court: \_\_\_\_\_

3. Case Name: \_\_\_\_\_ Trial Date and Judge: \_\_\_\_\_

County/Case #/Court: \_\_\_\_\_

Nature of case: \_\_\_\_\_

Judgment or other resolution: \_\_\_\_\_ Counsel for: \_\_\_\_\_

I certify that I understand the laws relating to, and the inter-relationships between, the Americans with Disabilities Act, the Federal Rehabilitations Act, California’s Disabled Person’s Act and California’s Unruh Civil Rights Act.

Signature and date: \_\_\_\_\_

**Class 3 - Special Education and Access to Higher Education**

Applicant must have completed three disability discrimination matters within the last five years involving education access and accommodations, two of which were resolved at an Administrative Law Judge hearing.

**Three (3) Discrimination Matters:**

1. Case Name: \_\_\_\_\_ Dates of representation: \_\_\_\_\_

County/Case #/Court: \_\_\_\_\_

Nature of case: \_\_\_\_\_

Resolution: \_\_\_\_\_

ALJ hearing

2. Case Name: \_\_\_\_\_ Dates of representation: \_\_\_\_\_

County/Case #/Court: \_\_\_\_\_

Nature of case: \_\_\_\_\_

Resolution: \_\_\_\_\_

ALJ hearing

3. Case Name: \_\_\_\_\_ Dates of representation: \_\_\_\_\_

County/Case #/Court: \_\_\_\_\_

Nature of case: \_\_\_\_\_

Resolution: \_\_\_\_\_

ALJ hearing

I had full responsibility as attorney of record for all cases listed in the application or, if not, I have attached an explanation.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_