

**ARBITRATOR APPLICATION FOR  
THE SEVENTEENTH JUDICIAL CIRCUIT**

**Instructions:** This application must be filled out in its entirety if you wish to be considered for inclusion on the list of qualified arbitrators for the Broward County Court and 17<sup>th</sup> Judicial Circuit. Please print legibly or type. A copy of your Training Certificate and, if applicable, a copy of your Florida Bar Card must be included with your application. Please attach a copy of your current resume or curriculum vitae and a statement as to any experience as an arbitrator. You must return the application with supporting documentation to: [bsimpsonjoseph@17th.flcourts.org](mailto:bsimpsonjoseph@17th.flcourts.org) or by mail at The Court Mediation and Arbitration Program, Broward County Courthouse, 201 S.E. Sixth Street, Room 19150, Fort Lauderdale, Florida, 33301.

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Full Legal Name: \_\_\_\_\_

Principle Business Address: \_\_\_\_\_  
\_\_\_\_\_

Business Address in Broward  
County, Florida to conduct  
arbitration hearings: \_\_\_\_\_  
\_\_\_\_\_

Business Phone: \_\_\_\_\_  
\_\_\_\_\_

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

Email Address: \_\_\_\_\_

Member of the Florida Bar?  Yes  No

Have you completed Supreme Court approved Arbitration Training?  Yes  No

Please check all types of cases for which you are seeking appointment:

- |   |   |
|---|---|
| <input type="checkbox"/> Consumer       | <input type="checkbox"/> Personal Injury/PIP                |
| <input type="checkbox"/> Contract       | <input type="checkbox"/> Products Liability                 |
| <input type="checkbox"/> Eminent Domain | <input type="checkbox"/> Property Damage                    |
| <input type="checkbox"/> Employment     | <input type="checkbox"/> Real Property/Mortgage Foreclosure |
| <input type="checkbox"/> Malpractice    | <input type="checkbox"/> Other: _____                       |

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date Signed