

201 Mission Street, 4th Floor San Francisco, CA 94105 Telephone: (415) 477-2374 Fax: (415) 477-2389 http://www.sfbar.org

#### APPLICATION FOR LABOR RELATIONS PANEL

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

Name:			
State Bar number:	_E-mail address:		
Telephone:	Fax:		
San Francisco office address:			
Marin County office address:			
Mailing address (if different):			
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

<u>Substantial Equivalent Experience - Under Rule 6</u>: 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.</u>

#### **Class 1A - Employer-Employee-Union Disputes**

In order to be referred matters in the following class, applicant must have completed representation of two matters in the class through a contested hearing in the last three years.

Type of Dispute	Court or Hearing Panel	Hearing Date
1.		

2.

# **Class 1B - Civil Service**

In order to be referred matters in the following class, applicant must have completed representation of two matters in the class through a contested hearing in the last three years.

1		 	
2.			

#### **Class 2 - Employment Discrimination**

Applicant must have handled through discovery two employment discrimination actions filed within the last five years, AND must have handled ANY two cases (civil or criminal) through a jury trial within the last seven years.

Two (2) cases through discovery:	
1. Case Name:	Date Filed:
County/Case #/Court:	
Nature of case:	
	Counsel for:
2. Case Name:	Date Filed:
County/Case #/Court:	
Nature of case:	
	Counsel for:
Two (2) jury trials through verdict:	
1. Case Name:	Trial Date and Judge:
County/Case #/Court:	
Nature of case:	
	Counsel for:
2. Case Name:	Trial Date and Judge:
County/Case #/Court:	
Nature of case:	
	Counsel for:

#### **Class 3 - Wrongful Discharge**

Applicant must have handled through discovery two wrongful discharge actions filed within the last five years AND must have handled ANY two cases (civil or criminal) through a jury trial within the last seven years. (Applicant may list the same cases handled through trial for both Class 2 and Class 3.)

## Two (2) cases through discovery:

1. Case Name:	Date Filed:	
County/Case #/Court:		
Nature of case:		
	Counsel for:	
2. Case Name:	Date Filed:	
County/Case #/Court:		
	Counsel for:	
Two (2) jury trials through verdict:		
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:		
Judgment or other resolution:		

# Class 4A – Wage and Hour Claims (Fair Labor Standards Act)

Applicant must have handled within the last five (5) years at least two (2) wage and hour claims on behalf of employees which required an evidentiary hearing (e.g. bench trials, agency hearings) AND have attended a CLE course in employment law for at least three (3) credits in the past two years. Please attach a separate sheet listing the name, date and number of credits of applicable CLE the CLE requirement.

Applicant agrees to continue during the course of panel membership to earn a minimum of three (3) CLE credits from attendance at employment law courses every two years AND has knowledge of the following Federal and State resources:

- a. Fair Labor Standards Act, 29 U. S. C. § 201, et seq;
- b. 29 CFR Chapter V
- c. U.S. Department of Labor FLSA Opinion Letters
- California Code of Regulations Industrial Welfare Commission Wage Orders, title 8, section 11010 to 11170
- e. DLSE Opinion Letters
- f. DLSE Enforcement Policies and Interpretations Manual

Within the last five (5) years applicant has handled at least two (2) wage and hour claims on behalf of employees which required an evidentiary hearing:

1. Case Name:
County/Case #/Court:
Nature of case:
Dates of representation:
2. Case Name:
County/Case #/Court:
Nature of case:
Dates of representation:

## Class 4B – Family Medical Leave Claims (Federal or State)

Applicant must have handled within the last five (5) years at least three (3) family medical leave claims on behalf of employees through discovery AND at least one (1) employment discrimination action through discovery. Applicant must also have attended a CLE course in employment law for at least three (3) credits in the past two years. Please attach a separate sheet listing the name, date and number of credits of applicable CLE the CLE requirement.

Applicant agrees to continue during the course of panel membership to earn a minimum of three (3) CLE credits from attendance at employment law courses every two years AND has knowledge to the following Federal and State resources:

- a. Family Medical Leave Act, 29 U. S. C. § 2601, et seq;
- b. 29 CFR sect. 825.100 et seq.
- c. U.S. Department of Labor FMLA Opinion Letters
- d. California Family Rights Act, title 2, sect. 7297.0 7297.11

# Within the last five (5) years applicant must have handled at least three (3) family and medical leave claims through discovery:

1. Case Name:
County/Case #/Court:
Nature of case:
Dates of representation:

2. Case Name:
County/Case #/Court:
Nature of case:
Dates of representation:
3. Case Name:
County/Case #/Court:
Nature of case:
Dates of representation:
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# AND applicant must have handled at least one (1) employment discrimination action through discovery:

1. Case Name:	
County/Case #/Court:	
Nature of case:	
Dates of representation:	

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

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