



Minnesota No-Fault Arbitrator Application Submission Instructions

- Step 1:** Complete the application electronically.
- Step 2:** Once completed, save the application to your computer. Please note that you may save and re-open the document at any time.
- Step 3:** When ready to submit, please attach the electronic copy of the application to an email, as well as all other required documents as noted in the application, and submit to Kelly Baker, Director of ADR Operations, at Bakerk@adr.org.
- Step 4:** Once your application has been reviewed and approved for submission to the Minnesota Supreme Court No-Fault Standing Committee, you will receive a confirmation email advising of such and when the Committee will consider the application.

If there are any deficiencies with your submission, you will be advised of such.

Please note: Applications must be approved by the No-Fault Standing Committee. The Committee reviews these applications on a quarterly basis. Following a decision by the Committee, the AAA will notify the applicant within 2 weeks of the decision.

If your application is approved, the AAA will also provide training information, as required under Rule 10(a)(3).

Submission Checklist

You must submit all of the following items:

- ☐ Completed and Signed Application (note that the application has three places that require your signature)
- ☐ Current copy of your CV/Resume (which includes your contact information)
- ☐ One Letter of Reference

**MINNESOTA NO-FAULT
ARBITRATOR APPLICATION**

Revised November 2024

Electronic completion of this form (to save information typed on the form) requires **Adobe Acrobat Reader 7 or above**. To download a free copy of the most current version of Acrobat Reader, please visit Adobe's website at www.adobe.com.

Information provided on this form will be used to evaluate your application to the Minnesota No-Fault Arbitration Panel. Note that if approved, the AAA will request additional information to create your Profile and Resume. **All sections of this form are required.**

Name: _____

Work History

A complete work history is required. Attach a separate sheet if necessary.

The Standing Committee requires an applicant to have been in the active practice of law for a minimum of five (5) years.

*Current Employer:	Name of Employer:
Title(s):	Title(s):
Dates of employment (MM/YY): *From: To: Present	Dates of employment (MM/YY): From: To:
Name of Employer:	Name of Employer:
Title(s):	Title(s):
Dates of employment (MM/YY): From: To:	Dates of employment (MM/YY): From: To:

Professional License(s)

List information pertaining to your **active** admission to the **Minnesota State Bar** along with other states where you are admitted to practice (**active licenses only**).

*Attorney Registration #:	State: Minnesota	*Date (YYYY):
Attorney Registration #:	State:	Date (YYYY):
Attorney Registration #:	State:	Date (YYYY):

Professional Associations

Please list **current** memberships and any offices held (e.g. Chair, Past President, etc.). **Do not abbreviate the name of the organization.**

Organization:	Organization:
Section(s):	Section(s):
Committee(s):	Committee(s):
Office(s) Held:	Office(s) Held:
Organization:	Organization:
Section(s):	Section(s):
Committee(s):	Committee(s):
Office(s) Held:	Office(s) Held:

**Attorney References**

Please provide three (3) attorney references with experience in the no-fault area. These references should include at least one **plaintiff** and one **defense** attorney. **You must also attach a letter of recommendation from one of your references.**

Name:	Name:	Name:
Company:	Company:	Company:
Title:	Title:	Title:
Address:	Address:	Address:
City:	City:	City:
State:	State:	State:
Zip Code:	Zip Code:	Zip Code:
Phone:	Phone:	Phone:

Law or ADR Practice (Please select either Law Practice or ADR Practice)**Law Practice**

Pursuant to Rule 10(a) of the Minnesota Rules of No-Fault Arbitration Procedure, if you have an active practice where you represent clients, at least $\frac{1}{4}$ (based on a five-year average), of your practice must include auto insurance claims.

What percentage of your law practice is in auto insurance claims? _____ %

Please indicate the percentage (%) of your auto insurance claims practice devoted to the following:

Representing Plaintiffs: _____ % Representing Defendants: _____ % Representing insurance companies' subrogation interests: _____ %

What does the remainder of your practice include: _____

ADR Practice

Pursuant to Rule 10(a) of the Minnesota Rules of No-Fault Arbitration Procedure, if you are not actively representing clients, but maintain an ADR practice, at least $\frac{1}{4}$ (based on a five-year average), of your practice must be in motor vehicle claims or no-fault matters.

What percentage of your ADR practice is in motor vehicle claims or no-fault matters? _____ %

What does the remainder of your ADR practice include? _____

**Qualifications**

Pursuant to Rule 10 of the Minnesota No-Fault Arbitration Rules, below are the requirements for qualification as an arbitrator:

- Must be a licensed attorney with at least five (5) years practice in Minnesota, or a retired attorney or judge in good standing.
- At least one-quarter, based on a five-year average, of practice must involve auto insurance claims or, for an attorney not actively representing clients, at least one-quarter, based on a five-year average, of ADR practice must involve motor vehicle claims or no-fault matters.

Requirements upon Approval to Panel:

- Must complete a "New Arbitrator" training program facilitated by the No-Fault Standing Committee and AAA prior to appointment to the Panel. The AAA will notify you of upcoming trainings after approval to the Panel.
- Must complete at least three (3) CLE hours on no-fault issues within your attorney-reporting period.
- Recertify each year and confirm at the time of recertification that you continue to meet the requirements under Rule 10.

By my electronic signature below, I hereby certify the following:

I am an attorney licensed to practice law in the State of Minnesota and in good standing.

At least one-quarter, based on a five-year average, of my practice involves auto insurance claims, or at least one-quarter, based on a five-year average, of my ADR practice involves motor vehicle claims or no-fault matters.

I must complete an arbitration training program approved by the No-Fault Standing Committee prior to appointment to the Panel.

Signature: /s/

Date:

(Please provide your signature by typing your name in the space above.)

Integrity and Fairness

Have you ever been the subject of disciplinary action by a professional organization, convicted of a crime, or had any of your Awards vacated as a result of your failure to disclose any interest or relationship likely to affect impartiality or which might create an appearance of partiality or bias?

NO _____ YES _____ *If you answered YES, please explain below.*

Also, attach and explain any and all orders from any jurisdictions pertaining to disciplinary action against you.

Failure to provide will result in denial of your application.

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Signature: /s/

Date:

(Please provide your signature by typing your name in the space above.)



Statement of Responsibilities and Understanding

I hereby confirm the following:

1. I understand that I am applying to be on the approved list of arbitrators for no-fault arbitration under the program conducted by the Minnesota Supreme Court's Standing Committee on No-Fault Arbitration administered by the American Arbitration Association (AAA).
2. To the best of my knowledge and belief the information herein and any attachments hereto, is true and accurate. If there is any change in the information provided, I agree to promptly notify the AAA. The AAA may seek to verify the accuracy of the information provided by me and it is hereby authorized to do so prior to my acceptance and during any subsequent review of my status on the AAA Minnesota No-Fault Panel. I understand that material inaccuracies in this information may result in my immediate removal from the Panel.
3. I agree to serve in accordance with all applicable AAA established procedures, Minnesota Rules of No-Fault Arbitration Procedure, and the *Standards of Conduct for Minnesota No-Fault Arbitrators*, in effect now and as they may be amended.
4. To remain a member in good standing on the AAA Minnesota No-Fault Panel, I understand that I must adhere to any applicable policies, guidelines or standards established for continuing membership on the AAA Minnesota No-Fault Panel.
5. I understand that neither acceptance to the Panel, nor appointment to cases shall make me an employee, agent or independent contractor of the AAA.
6. I recognize that neither my willingness to serve as an arbitrator, nor acceptance on the AAA Minnesota No-Fault Panel obligates AAA to propose me for appointment as an arbitrator in any case, nor will I be under any obligation to accept appointments.
7. I understand that although AAA may serve in its administrative capacity to collect and disburse payments for compensation that may become due to me for services as an arbitrator in an AAA case, such compensation is the sole obligation of the parties to the dispute, and AAA has no liability to me for payment of fees.

☐ **I have reviewed all the provisions in the Statement of Responsibilities and Understanding, and I acknowledge and agree to comply with them.**

Signature: /s/

Date:

(Please provide your signature by typing your name in the space above.)