



Maine State Bar

A S S O C I A T I O N

LRS

The
Lawyer Referral
Service

Application
and
Panel Selections



Authorized to use ABA logo and slogan since June 2005.

Use of the ABA Lawyer Referral and Information Service logo indicates that this lawyer referral program has been reviewed by the ABA and meets the specific public service standards established by the ABA. ABA approved lawyer referral programs:

- *Agree to establish and maintain objective experience criteria for their panel attorneys,*
- *Provide a mechanism for client feedback and resolving client complaints*
- *Do not limit the number of attorneys who may join the Lawyer Referral and Information Service, provided that they meet the objective requirements for panel membership,*
- *Require and verify that all panel attorneys carry legal malpractice insurance.*

*Use of the logo indicates that this program meets ABA standards for lawyer referral services. **The ABA does not review the qualifications of the individual lawyers who participate in the service. For more details on the ABA standards, visit www.abanet.org/legalservices/lrsrules.html.***

Please Note!

- 1) **To be eligible to join LRS**, you must be in good standing with the Maine Board of Overseers of the Bar at the time of application.

- 2) **Each LRS membership is for the named attorney only.** Membership is based on the information and experience certified by the individual applicant, and does not extend to firms. LRS Standards & Rules do allow referrals to be transferred within a firm *after the initial consultation by the member attorney* subject to certain conditions regarding reporting, remittals, and formal responsibility (*see Standards & Rules.*)

- 3) **Each LRS dues payment is for a single office location.** If you have a second office from which you personally practice, *and* you would like both office locations and geographic practice areas to come up in panel rotations please include second office information and additional membership fee.

Before mailing, please make copies for your own records.



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Lawyer Referral Service
P O Box 788
Augusta, ME 04332-0788

Application Mailing Checklist

- This Application Checklist
- Application and Panel Selections
Page 1 through Page 8, checked, signed and dated
- Statement of Obligation, appropriately signed
- Experience Panel Applications, as applicable
 - Civil Appeals
 - ADR/Mediation
 - Family Law
 - Family Medical Leave Act
 - Employment Law
 - Medical Malpractice
 - Social Security Law
 - Veterans Benefits and Appeals
- Proof of Insurance
- Membership Dues *
 - 1 Office - \$100 if you are already an MSBA member
\$150 for non-member
 - 2 Offices-\$200 for MSBA member
\$300 if non-member

Check# _____ Amount _____

OR Credit Card:

Name on Card _____

Card # _____ CVC _____ Exp. Date _____

* If your check or credit card payment is intended to cover membership applications for two or more attorneys in your firm, please note the last names of all attorneys covered by dues payment, and include a complete application packet for each attorney.



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Maine State Bar
A S S O C I A T I O N

Lawyer Referral Service

Application

Your Name _____ Passed Maine Bar (year) _____

Firm Name _____

Primary Office

Street Address _____ Tel _____

Mailing Address _____ Fax _____

City _____ State _____ Zip _____ E-mail _____

Primary Staff Person: Name _____ E-mail _____

Secondary Office

Street Address _____ Tel _____

Mailing Address _____ Fax _____

City _____ State _____ Zip _____ E-mail _____

Primary Staff Person: Name _____ E-mail _____

See back of page for Additional Information

What We Make Public

Callers frequently ask us for information about the attorneys to whom we make referrals. **We do not make recommendations for or give personal opinions about any of our members.** We do disclose, when asked, post-graduate and law degrees, the year a member passed the bar, and the areas of law in which a member is enrolled with us.

Regarding Fees

We do not give specific rates for specific attorneys, firms, or types of legal services. Clients often would like to get an idea of what legal services cost, however, so we do quote them parameters for Maine lawyers in general, as estimated from information from members held confidentially by the service.

For purposes of this estimate,
please indicate your average hourly rate. _____

In order to facilitate entering your data into our system, _____
please put your first initial and last name here on each page

Panel Selections

PART ONE - Practice Options

Accommodations I am willing to provide the following:
AAHV home/nursing home visits
AAWE weekend or evening appointments

Administrative/Billing Possibilities

UBFF Willing to Consider Flat/Fixed Fee Arrangements

UBPS Various, in conjunction with other panels

UBSC Pro Se/Small Claims Assistance

- In addition to Maine, I am licensed to practice in _____
 In addition to English, I speak the following language(s) fluently enough to serve clients who speak this language exclusively. _____
-

PART TWO - Geography of Practice

I will accept cases and clients in the following counties:

- | | | | |
|---------------------------------------|------------------------------------|--------------------------------------|------------------------------------|
| <input type="checkbox"/> Androscoggin | <input type="checkbox"/> Aroostook | <input type="checkbox"/> Cumberland | <input type="checkbox"/> Franklin |
| <input type="checkbox"/> Hancock | <input type="checkbox"/> Kennebec | <input type="checkbox"/> Knox | <input type="checkbox"/> Lincoln |
| <input type="checkbox"/> Oxford | <input type="checkbox"/> Penobscot | <input type="checkbox"/> Piscataquis | <input type="checkbox"/> Sagadahoc |
| <input type="checkbox"/> Somerset | <input type="checkbox"/> Waldo | <input type="checkbox"/> Washington | <input type="checkbox"/> York |
-

PART THREE - Litigation and Courts of Jurisdiction

- LITIGATION** - We are not always able to tell from our conversations with callers if their issues may require litigation or not. However, for those callers specifically requesting litigation attorneys, or presenting issues that frequently lead to litigation, we **add on** Litigation in our referral search. If you practice litigation, please check the box to the left of this paragraph.

- FEDERAL COURT LITIGATION - Add On, as above**

In addition to Maine State District, Superior, and Supreme Courts, I also practice in:

- FTPA Tribal Court - Pasamaquoddy
FTPB Tribal Court - Penobscot
FTMM Tribal Court - Micmac
-

PART FOUR - Special Considerations

GCPG **Willing to Accept Cases Opposing Governmental Parties**

GRPC **Willing to Accept Cases with Civil Rights Implications Asserted**

Administrative Law

- | | |
|---|--|
| ADCT <input type="checkbox"/> Before City or Town Government | ADSA <input type="checkbox"/> State Agencies |
| ADDL <input type="checkbox"/> Dept. Labor | ADSB <input type="checkbox"/> State Licensing Boards |
| ADFA <input type="checkbox"/> Federal Agencies | ADUC <input type="checkbox"/> Unemployment Compensation |
| ADFB <input type="checkbox"/> Federal Licensing Boards | ADVB <input type="checkbox"/> Veterans Benefits |
| ADHP <input type="checkbox"/> Representing Health Care Provider | ADWF <input type="checkbox"/> Federal Workers Compensation |
| ADHS <input type="checkbox"/> DHS Affairs | ADMV <input type="checkbox"/> Dept. Motor Vehicles |
| ADMP <input type="checkbox"/> Representing Medical Professional | ADOT <input type="checkbox"/> Dept. of Transportation |
| ADMN <input type="checkbox"/> Workers Compensation - NH | |
| ADWM <input type="checkbox"/> Workers Compensation - ME | |

Admiralty Law

- SSPI Personal Injury on Ship or Boat SSCMI Commercial

Bankruptcy and Garnishment of Wages

- | | |
|---|---|
| BKPD <input type="checkbox"/> Personal Bankruptcy - rep. Debtor | BKPC <input type="checkbox"/> Personal Bankruptcy - rep. Creditor |
| BKCD <input type="checkbox"/> Commercial Bankruptcy - rep. Debtor | BKCC <input type="checkbox"/> Commercial Bankruptcy - rep. Creditor |
| BKGR <input type="checkbox"/> Garnishment of Wages | BSBR <input type="checkbox"/> Banking Rules for Customer |

Business and Banking Law

- | | |
|--|--|
| BSBR <input type="checkbox"/> Banking Rules/for Customer | BSLC <input type="checkbox"/> LLC and Partnerships |
| BSFD <input type="checkbox"/> Forming/Dissolving Partnerships | BSNP <input type="checkbox"/> Non-Profit Start-Up |
| BSIN <input type="checkbox"/> Internet Business/for Business | BSSS <input type="checkbox"/> Stocks, Securities and Commodities |
| BSIT <input type="checkbox"/> International Trade/Bus. Regulations | BSSU <input type="checkbox"/> Business Start-Up and Organization |
| BSCR <input type="checkbox"/> Commercial Landlord/Tenant Disputes | BSVS <input type="checkbox"/> Disputes with Vendors/Suppliers |
| | BSWC <input type="checkbox"/> Unauthorized Withdrawal/Checks |

for CIVIL APPEALS see Experience Panel Section ➡➡➡

Constitutional Law and Civil Rights

- | | |
|---|---|
| CCAD <input type="checkbox"/> ADA Matters | CCHR <input type="checkbox"/> Before MHRC or EEOC |
| CCCE <input type="checkbox"/> Contesting Elections | CCPT <input type="checkbox"/> Patient Rights |
| CCDH <input type="checkbox"/> Discrimination in Housing | CCRI <input type="checkbox"/> Civil Rights Implications Asserted - Add on |
| CCFA <input type="checkbox"/> First Amendment Issues | |

Criminal & Traffic

- | | |
|---|--|
| CRAL <input type="checkbox"/> Appeals | CRBP <input type="checkbox"/> Bail Hearings or Pleadings |
| CROU <input type="checkbox"/> OUI/DUI | CRDS <input type="checkbox"/> Criminal in District or Superior Court |
| CRTV <input type="checkbox"/> CRIMINAL Traffic Violations | CRDR <input type="checkbox"/> Drug Charges |
| CRJV <input type="checkbox"/> Criminal - Juvenile | CREX <input type="checkbox"/> Pardons and Vacating Convictions |
| CRSO <input type="checkbox"/> Sexual Offender List Issues | CRFW <input type="checkbox"/> Fish & Wildlife Charges |
| CRLB <input type="checkbox"/> Log Book Violations | CRIM <input type="checkbox"/> Issues Re Impounded Possessions |
| | CRPV <input type="checkbox"/> Parole and Probation Issues |
| CVTR <input type="checkbox"/> CIVIL Traffic Violations | CRAC <input type="checkbox"/> Animal Cruelty and Abuse |

Consumer Law

- | | | |
|--|---|--|
| CNCC <input type="checkbox"/> Credit Card Disputes | CNCH <input type="checkbox"/> Creditor Harassment | CNCI <input type="checkbox"/> Construction Issues |
| CNRH <input type="checkbox"/> Refusal to Honor Warranty | CNLL <input type="checkbox"/> Lemon Law | CNPR <input type="checkbox"/> Predatory Lending |
| CNCM <input type="checkbox"/> Collecting Money Owed | CNPL <input type="checkbox"/> Product Liability | CNCR <input type="checkbox"/> Car Repair Dispute |
| CNDC <input type="checkbox"/> Defending Against Collection | CNTM <input type="checkbox"/> Toxic Mold | CNUT <input type="checkbox"/> Unfair Trade Practices |
| CNSL <input type="checkbox"/> Student Loan Issues | CNPH <input type="checkbox"/> Pharmacy Error | CNHV <input type="checkbox"/> HIPAA Violations |
| CNPM <input type="checkbox"/> Pharm/Med. Product Liability | CNIT <input type="checkbox"/> Identity Theft | CNCU <input type="checkbox"/> Unauth.Withdrawal/
Checks |

Education Law

- | | |
|---|---|
| EDHE <input type="checkbox"/> Higher Education Issues | EDSC <input type="checkbox"/> Before School Committee |
| EDRT <input type="checkbox"/> Representing Teachers | EDRS <input type="checkbox"/> Representing Students |
| EDRA <input type="checkbox"/> Representing Administrators | EDSN <input type="checkbox"/> Special Needs/Special Education |

Elder Law

- | | |
|---|---|
| ELMA <input type="checkbox"/> Mainecare - Fair Hearing/ Appeals | ELME <input type="checkbox"/> Mainecare - Eligibility/Longterm Planning |
| ELMC <input type="checkbox"/> Medicare | ELNH <input type="checkbox"/> Nursing Home Resident Rights |
| ELPA <input type="checkbox"/> Powers of Attorney | ELSN <input type="checkbox"/> Special Needs Trusts |
| ELPT <input type="checkbox"/> Transfer of Property/Improvident Transfer | |

*for EMPLOYMENT Law and FDOL FMLA and FWS Law
see Experience Panel Section ➡➡➡➡*

Environmental Law - defense only

- | | |
|--|---|
| EVAS <input type="checkbox"/> Asbestos | EVDP <input type="checkbox"/> before DEP |
| EVEP <input type="checkbox"/> before EPA | EVFW <input type="checkbox"/> Farm Waste |
| EVIW <input type="checkbox"/> Industrial Waste | EVLO <input type="checkbox"/> Land Fill/Oil Storage |
| EVPS <input type="checkbox"/> Pesticides | EVRA <input type="checkbox"/> Radon |

Foreclosure

- | |
|---|
| FFBL <input type="checkbox"/> Representing Borrower or Lender |
| FFDB <input type="checkbox"/> Representing Borrower |
| FFDL <input type="checkbox"/> Representing Lender |

for FAMILY Law see Experience Panel Section ➡➡➡➡

Immigration Law

- | | |
|--|--|
| IMAS <input type="checkbox"/> Asylum | IMFA <input type="checkbox"/> Immigration based on Family |
| IMDD <input type="checkbox"/> Deportation and Detention Issues | IMMI <input type="checkbox"/> Miscellaneous |
| IMEM <input type="checkbox"/> Immigration based on Employment | IMNC <input type="checkbox"/> Naturalization and Citizenship |

Intellectual Property

- INCL Copyright/Literary Rights INCM Copyright/Music INPA Patent
 INII Internet Issues INTM Trademark

Landlord/Tenant Law

representing LANDLORD

- LTLM Mobile Home/Campground
 LTLA Issues with Tenants Association
 LTBL Lease Issues for Landlord

- LTLO Other - Landlord
 LTLE Eviction/Landlord
 LTWL Warrant of Habitability for Landlord

representing TENANT

- LTTM Mobile Pk/Campground/Tenant
 LTTA For Tenants Association for Tenant
 LTBT Lease Issues for Tenant

- LTTO Other/Tenant
 LTTE Eviction/Tenant
 LTWH Warrant of Habitability for Tenant

Maine State Retirement

- MSRI Maine State Retirement Issues
 MSDI Maine State Disability Issues

for MEDICAL MALPRACTICE Law
see Experience Panel Section ➡➡➡

Military Law

- MIFD Federal Proceedings
 MIFI Administrative Hearings
 MIAH Military Family Issues
 MIPH Rights of Military Personnel and Heirs

Order for Protection -

- Non-Family** OPEA PF Abuse
 OPFH PF Harrassment

Probate

- | | |
|--|---|
| PADT <input type="checkbox"/> Adoption | PTPT <input type="checkbox"/> Third Party Trusts |
| PAED <input type="checkbox"/> Administration Estate of Deceased Person | PRMH <input type="checkbox"/> Mental Health Issues |
| PLTE <input type="checkbox"/> Litigation of Wills, Trusts, and Estates | PCON <input type="checkbox"/> Conservatorship |
| PPET <input type="checkbox"/> Estate Planning for Pets | PGAL <input type="checkbox"/> Guardian Ad Litem |
| PSPI <input type="checkbox"/> Surrogate Parent Issues | PGRD <input type="checkbox"/> Guardianship |
| PWTE <input type="checkbox"/> Preparation of Wills, Trusts and Estates | PRIC <input type="checkbox"/> Involuntary Commitment |
| PINC <input type="checkbox"/> Providing for Incapacitated Adult | PLTC <input type="checkbox"/> Long Term Care Planning |

Real Estate

- | | |
|--|--|
| RLKE <input type="checkbox"/> Like Kind Exchange | REML <input type="checkbox"/> Mechanics Lien |
| RCBT <input type="checkbox"/> Commercial/Business Transactions | RPBD <input type="checkbox"/> Possession or Boundary Dispute |
| RCON <input type="checkbox"/> Condominiums (purchase/sale) | RPSC <input type="checkbox"/> Purchase or Sale, Commercial |
| RDWC <input type="checkbox"/> Dispute with Contractor | RPSR <input type="checkbox"/> Purchase or Sale, Residential |
| RLUC <input type="checkbox"/> ME Land Use Regs (LURC) | RZBD <input type="checkbox"/> Zoning Board Dispute |
| RLOD <input type="checkbox"/> Litigation re Ownership Dispute | RERW <input type="checkbox"/> Roads, Easements & Rights of Way |
| RPAR <input type="checkbox"/> Partitioning of Property | RPPP <input type="checkbox"/> Permitting and Planning |
| RCHR <input type="checkbox"/> Organizing or Representing Condo, Homeowners, or Road Association | |
| RCHD <input type="checkbox"/> Representing Individual in Dispute with Condo, Homeowners, or Road Association | |

for SOCIAL SECURITY Law and VETERANS BENEFITS Law
see Experience Panel Section ➡➡➡

Transactional Law

TLDI Denial of Insurance Claims
 TLCL Contracts
 TLNA Non-Compete Agreements
 TLPA Representation of Performance Artists

Tax Law

TXB Business Tax Issues
 TXI Income Tax Issues
 TXP Property Tax Issues

<p>Tort Law: Recovery</p> <p>TTRAC <input type="checkbox"/> Auto Collision TTRAS <input type="checkbox"/> PI - Asbestos TTRDS <input type="checkbox"/> Defamation, Slander TTRLM <input type="checkbox"/> Legal Malpractice TTRPD <input type="checkbox"/> Property Damage TTRPI <input type="checkbox"/> PI - Miscellaneous TTRPT <input type="checkbox"/> Property Damage - Pet Care TTRSA <input type="checkbox"/> PI - Sexual Assault/Abuse TTRPR <input type="checkbox"/> PD- Return of Property TTRLU <input type="checkbox"/> PD- Loss of Use TTRMC <input type="checkbox"/> PI - Claims Against Maine Corrections/Fed. Bur. Prisons - Conditions TTRMM <input type="checkbox"/> PI - Claims Against Maine Corrections/Fed. Bur. Prisons - Denial /Inadaquate Medical Care TTRPB <input type="checkbox"/> PI -Excessive Force/Police Brutality TIRWD <input type="checkbox"/> Wrongful Death</p>	<p>Defense</p> <p>TTDAC <input type="checkbox"/> Auto Collision TT DAS <input type="checkbox"/> PI - Asbestos TTDDS <input type="checkbox"/> Defamation, Slander TT DLM <input type="checkbox"/> Legal Malpractice TTDPD <input type="checkbox"/> Property Damage TT DPI <input type="checkbox"/> PI - Miscellaneous TT DPT <input type="checkbox"/> Property Damage - Pet Care TTDSA <input type="checkbox"/> PI - Sexual Assault/Abuse TT DWD <input type="checkbox"/> Wrongful Death Defense</p>
---	--

for VETERANS BENEFITS AND APPEALS see Experience Panel Section →→→

Certification of Information

I certify that:

- 1) I am in good standing with the Maine Board of Overseers of the Bar, licensed to practice Maine law;
- 2) I understand that this application and membership fee qualifies me **personally** to receive referrals from the Lawyer Referral Service, and does not in any way qualify other members of my firm to conduct initial consultations with LRS callers referred to me;
- 3) I am experienced in all of the areas of law I have selected for referrals;
- 4) I carry \$100,000 in professional liability insurance, or as otherwise required if registering on an Exp. Panel;
- 5) I understand that LRS staff will make every effort to make referrals as appropriately as possible without staff making judgments that may be construed as practicing law without a license;
- 6) I agree to refer all LRS callers back to the service for referral to another member if for any reason I am not able to serve them;
- 7) If I believe a referral has been made inappropriately, I will personally discuss the issue with Service staff; an
- 8) I agree to identify all LRS cases according to the requirements in Section 3.2.1, and to inform LRS as to the disposition of the case should I leave the firm or the practice of law.
- 9) I have read the LRS Standards & Rules and agree to abide by them.

Print Name: _____ **Date:** _____

Signature: _____

Statement of Obligation

This statement confirms that attorney _____ has joined the **Lawyer Referral Service of the Maine State Bar Association** with the full knowledge and agreement of partners/firm management of _____ and will abide by all the rules and agreements as stipulated in the **Lawyer Referral Service Standards & Rules** document, including remittal of 10% of all received legal fees from each LRIS-referred client over and above the first \$200 paid for services on the matter referred per LRS protocols.

This statement also confirms that should the member attorney above leave this firm/partnership, or the practice of law:

- any open case or referral from LRS to this attorney *left with the firm/partnership* will be subject to the same reporting and remittal agreements under which it was accepted until each case or referral is complete;
- any open case or referral from LRS to this attorney and **remaining with this attorney** will remain subject to the same reporting and remittal agreements under which it was accepted until each case or referral is complete; and
- any open case or referral *not continuing with either the above attorney or firm* will be immediately referred back to LRS by the member attorney.

Failure to keep these agreements will be cause for action by the Lawyer Referral Committee and the Maine State Bar Association.

LRS membership will be active only on return of this form with the following signatures, as appropriate to firm structure.

LRS Member Attorney:

PRINT _____

Signature _____

Date _____

Small Firm Partner Attorney: N/A

PRINT _____

Signature _____

Date _____

Firm Managing Partner N/A

PRINT _____

Signature _____

Date _____

New Member Survey

1) What was the purpose of your becoming a member of LRS? If you had more than one purpose, please note them all, with the most important first.

2) What do you understand the purpose of LRS to be? If you think there are multiple purposes, indicate which is most important.

3) What sources of information formed your impression of LRS? Check all that apply.

- Talk with other member attorneys.
- Ads and articles in the Bar Journal and Supplement
- Talk with the Director or any of the MSBA staff
- Seeing LRS ad materials in public places.
- Reading the material on the LRS website
- Other

Thank you.

Experience Panels Applications

ADR/Mediation

Civil Appeals

Family Law

FMLA/FLSA Law

Employment Litigation

Medical Malpractice

Social Security Law

Veterans Benefits



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Name _____

Alternative Dispute Resolution and Mediation

Scope: The Lawyer Referral Service offers membership on its ADR panel only to those attorneys who have satisfied all the requirements set by the CADRES (Court Alternate Dispute Resolution Services) for acceptance onto the Maine State Judicial Branch ADR rosters.

Please attach proof of active listing on the State of Maine ADR rosters for any of the following areas.

- XADR Domestic Relations Mediation Roster
- XAGC General Civil Litigation Mediation Roster
- XALU Land Use/Environmental/Natural Gas Pipeline Mediation Roster
- XANE Superior Court Early Neutral Evaluation Roster
- XASA Superior Court Arbitration Roster
- XASC Small Claims Mediation Roster
- XASM Superior Court Mediation Roster

Certification of Information

I certify that I meet all requirements for participation on the Lawyer Referral Service ADR/Mediation Experience Panel, as set forth above.

Print Name: _____ Date: _____

Signature: _____



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Name _____

Family Law Experience Panel

Scope: Members of this panel are accomplished attorneys who have sufficient training and experience to competently represent clients in Family law matters involving actions for divorce and to establish paternity and parental rights and responsibilities, including post-judgment actions in these areas, as evidenced by:

Family Law Experience Panel Criteria

I. General Practice & Litigation Experience

✓ Satisfy 2 requirements

- Active practice for at least 5 years — Since _____.
- Served as lead counsel in 8 cases of any sort in Maine and/or Fed. Court within last 5 years.
- Participated in Fed. Court summary judgment or argued one appeal within last 5 years.
- Completed CASA training within the last 10 years – Year _____.
- Prepared documents and assisted in family law filings, not necessarily to resolution, for 10 cases in last 5 years.

II. Family Law Specific Experience

✓ satisfy *either a or b*

- a) Actively participated in 1 Family Law case brought to trial which involved parental rights and responsibilities and/or property or equitable distribution issues within last 5 years.

Fill In:

Case Name: _____ Docket: _____ Court: _____ Year _____

- b) Negotiated a final resolution of 5 Family Law cases in last 5 years, three of which involved parental rights and responsibilities and/or property or equitable distribution issues.

Attach list.

III. Education

✓ Satisfy 1 of 2 requirements

- a) Attended at least 15 CLE hours on Family Law in past 10 years

Attach list with seminar titles, years, and credits.

- b) Served on faculty of 2 CLE seminars on Family Law topics

Attach list with seminar titles, session title, and year.

(Over for Certification and Panel Selection)

Name _____

Family Law Experience Panel (cont'd)

Certification of Information

I certify that I meet all requirements for participation on the Lawyer Referral Service *Family Law Experience Panel* as set forth above.

Print Name: _____ Date: _____

Signature: _____

SELECT sub-categories below:

Family Law Experience Panel

- | | | | |
|---|--|-------------------------------|------------------------------------|
| XFCS <input type="checkbox"/> | Custody & Support | XFGF <input type="checkbox"/> | Guardian Ad Litem - Family Issues |
| XFDH <input type="checkbox"/> | DHS Issues | XFGP <input type="checkbox"/> | Grandparents Rights and Visitation |
| XFDS <input type="checkbox"/> | Divorce & Separation | XFPA <input type="checkbox"/> | Paternity Determination |
| XFFA <input type="checkbox"/> | Family Abuse - Sexual or Physical | XFPP <input type="checkbox"/> | Protection Orders in Family |
| XFFP <input type="checkbox"/> | Foster Parents Rights and Responsibilities | XFPP <input type="checkbox"/> | Rights of Unmarried Persons |
| XFGD <input type="checkbox"/> | Guardian Ad Litem - Divorce | XFSS <input type="checkbox"/> | Spousal Support |
| XFTR <input type="checkbox"/> | Termination of Parental R&R | XFJM <input type="checkbox"/> | Post-judgment Motions |
| XFDA <input type="checkbox"/> | Annulment | XFSP <input type="checkbox"/> | Rights of Surrogate Parents |
| XFDP <input type="checkbox"/> De Facto Parenting Claims | | | |

Name _____

Family Medical Leave Act (FMLA) Experience Panel

Scope: Members of this panel are accomplished attorneys who have sufficient training and experience to competently represent clients in Family Medical Leave Act cases which may have been previewed by the Federal Department of Labor and directed to MSBA LRS per the participation of this service in a program created in collaboration with the American Bar Association, including only ABA-Approved referral services, in order to give citizens access to local legal consultation and/or representation in cases with possible merit. Participation criteria for this panel fulfill the requirements put forth by the DOL.

FMLA Experience Panel Criteria

I. General Practice & Litigation Experience

Required

- The attorney has represented employees in at least three cases asserting claims arising under the Family Medical Leave Act (29 U.S.C. §2601, et. seq.) to resolution in the past three years.

IDENTIFY CASES BY NAMES AND/OR DOCKET NUMBERS and DATE COMPLETED

1) _____

2) _____

3) _____

II. Employment Law Specific Continuing Education

Required

The attorney has attended a CLE course in employment law for at least three credits in the past two years:

- Fill In and Attach proof of attendance:**

CLE Event & Producer: _____

Location: _____ Date: _____

and

- agrees to continue during the course of panel membership to earn a minimum of three CLE credits from attendance at employment law courses every two years, providing POA as requested.

Certification of Information

I certify that I meet all requirements for participation on the Lawyer Referral Service *Family Medical Leave Act Experience Panel* as set forth above.

Print Name: _____ Date: _____

Signature: _____

Select Either or Both Panels by Checking Box(es)

- XDLE DOL FMLA for Employee
XDLR DOL FMLA for Employer

Name _____

Fair Labor Standards Act (FLSA) Wage & Hour Experience Panel

Scope: Members of this panel are accomplished attorneys who have sufficient training and experience to competently represent clients in Fair Labor Standards Act (FLSA) Wage and Hour cases which may have been previewed by the Federal Department of Labor and directed to MSBA LRS per the participation of this service in a program created in collaboration with the American Bar Association, including only ABA-Approved referral services, in order to give citizens access to local legal consultation and/or representation in cases with possible merit. Participation criteria for this panel fulfill the requirements put forth by the DOL.

FLSA Experience Panel Criteria

I. General Practice & Litigation Experience

Required:

The attorney has had substantial involvement in at least three matters to resolution on behalf of employees involving wage and hour claims within the last three years.

IDENTIFY CASES BY NAMES AND/OR DOCKET NUMBERS and DATE COMPLETED

1) _____

2) _____

3) _____

II. Employment Law Specific Continuing Education

Required:

The attorney has attended a CLE course in employment law for at least three credits in the past two years

Fill In and Attach proof of attendance:

CLE Event & Producer: _____

Location: _____ Date: _____

and

agrees to continue during the Course of panel membership to earn a minimum of three CLE credits from attendance at employment law courses every two years, providing POA as requested.

Certification of Information

I certify that I meet all requirements for participation on the Lawyer Referral Service *Fair Labor Standards Act Experience Panel* as set forth above.

Print Name: _____ Date: _____

Signature: _____

Select Either or Both Panels by Checking Box(es)

XDSE DOL FLSA for Employee
XDSR DOL FLSA for Employer

Employment Law Experience Panel

Scope of panel: members of this panel are accomplished attorneys who have sufficient training and experience to competently represent employers or employees in litigation involving employee benefits, termination issues, workplace discrimination claims, and government employment. The panelists do not necessarily have expertise on collective bargaining issues, union representation, E.R.I.S.A. or other highly specific employment matters.

Experience (must satisfy 2 requirements in each category)

General Practice and Litigation

- a) Must have been in active practice for five years
- b) Actively litigated in 8 cases of any sort in Maine and/or Federal Courts
- c) Participated in Federal Court summary judgment *or* argued one appeal

Employment Law Specific Experience

- d) Actively participated in 1 Employment Law case brought to trial
- e) Negotiated a final resolution of 2 Employment Law cases in last 5 years
- f) Pursued or defended a charge of employment discrimination before Maine Human Rights Commission in at least 3 cases, with at least 1 personal appearance

Education (must satisfy 1 of the 3 requirements)

- a) Attended at least 10 hours of CLE on Employment Law in past 10 years
- b) Served on faculty of 2 CLE seminars on Employment Law topic
- c) Authored 3 or more published articles on Employment Law topic

Criteria Documentation

Experience: Must satisfy 2 requirements in BOTH of the Experience sub-categories

Sub-category I: General Practice and Litigation

- a) Actively practiced law for 5 or more years, since _____
- b) Actively litigated in 8 cases of any sort in Maine and/or Federal Courts - list cases:

Docket Number

1 _____

2 _____

3 _____

4 _____

5 _____

6 _____

7 _____

8 _____

- c) Participated in Federal Court summary judgment or argued one appeal:

1 _____

Name _____

Sub-category II: Experience Specific to Employment Law (must satisfy 2 of 3)

d) Actively Participated in 1 Employment Law case brought to trial

Docket # _____

e) Negotiated to final resolution 2 Employment Law cases in last 5 years

Case _____ Docket # _____

Case _____ Docket # _____

f) Pursued or defended a charge of employment discrimination before Maine Human Rights Commission in at least 3 cases, with at least 1 personal appearance

Case _____ Docket # _____ Appearance

Case _____ Docket # _____ Appearance

Case _____ Docket # _____ Appearance

Education (must satisfy 1 of the 3 below)

a) Attended at least 10 hours of CLE on Employment Law in past 10 years

	Seminar Title	Date	Credits
1	_____	_____	_____
2	_____	_____	_____
3	_____	_____	_____
4	_____	_____	_____
5	_____	_____	_____
6	_____	_____	_____
7	_____	_____	_____

b) Served on faculty of 2 CLE seminars on Employment Law topic

	Seminar Title	Location	Date
1	_____	_____	_____
2	_____	_____	_____

c) Authored 3 or more published articles on Employment Law topic

Attach copies, with journal name and publication date.

Name _____

Certification of Information

I certify that I meet all requirements for participation on the Lawyer Referral Service *Employment Law Experience Panel*, as set forth above.

Print Name: _____ Date: _____

Signature: _____

SELECT sub-categories below:

Employment Law

Representing EMPLOYEES

- XEDS Discrimination
- XENC Non-Compete Agreements - Disputes
- XERR ERISA, Retirement Benefits, Pensions
- XESH Sexual Harassment
- XETN Termination - Non-Union
- XETU Termination - Union
- XEUE Unemployment Issues
- XEUR Union Representation Problems
- XEWB Whistle Blowers Act for Employee

Representing EMPLOYER

- XERD Discrimination
- XERP ERISA, Retirement Benefits, Pensions
- XERS Sexual Harassment
- XERT Termination - Non-Union
- XERU Termination - Union
- XERI Unemployment Issues
- XERX Union Representation Problems
- XEWE Whistle Blowers Act for Employer



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Medical Malpractice Experience Panel

Scope of the panel: members of this panel are highly accomplished trial attorneys who have sufficient training, experience, and resources to competently represent clients in medical malpractice litigation.

1. Litigation experience (3 of 4 criteria must be met):

- (a) Handled 2 or more cases through the medical malpractice screening panels in the past 5 years;
- (b) Tried to jury verdict at least 1 medical malpractice case **or** other personal injury cases in the past 5 years;
- (c) Litigated through discovery at least 10 medical malpractice **or** other personal injury cases in the last 5 years; **or**
- (d) Served as panel member on a pre-litigation screening panel.

2. Variance:

An applicant lacking in any element of the criteria in Section 1 may request a variance from the criteria by submitting to the LRS Committee a written request which explains how other experience demonstrates satisfactory command of this complex area of litigation. An application for variance must be submitted to the Executive Director of LRS who shall present it for consideration of the committee to determine applicant's eligibility.

3. Representations by the prospective panelists:

- (a) The panelist must be willing to accept cases on a statewide basis;
- (b) The panelist is willing to advance the expenses of litigation;
- (c) The panelist must carry professional liability coverage of \$1,000,000.00.

Criteria Documentation

1. Litigation experience (3 of 4 criteria must be met):

(a) 2 or more cases through medical malpractice screening panel in last 5 years;

	Case Name	Docket Number
1		
2		
3		

(b) Tried to jury verdict at least 2 med mal or personal injury cases in past 5 years;

Case Name _____ Docket Number _____

Case Name _____ Docket Number _____

Name _____

(c) Litigated through discovery at least 10 med mal or personal injury cases in last 5 years

Case Name	Docket Number
1	
2	
3	
4	
5	
6	
7	
8	
9	
10	

(d) Served as panel member on pre-litigation screening panel

Case Name	Docket Number

VARIANCE OPTION: Please check here **ONLY** if submitting a request for a variance, and attach page(s) of argument on letterhead, signed and dated

Certification of Information

I certify that I meet all requirements for participation on the Lawyer Referral Service *Medical Malpractice Experience Panel*, as set forth above. I further certify that:

I will

- ___ accept cases on a statewide basis;
- ___ advance the expenses of litigation

and that I do

- ___ carry professional liability coverage of \$1,000,000.00.

Print Name: _____ Date: _____

Signature: _____

SELECT sub-categories:

Medical Malpractice Law	
XMP	<input type="checkbox"/> Against Physician/Staff
XMH	<input type="checkbox"/> Against Hospital/Staff
XMD	<input type="checkbox"/> Against Dentist/Staff
XMT	<input type="checkbox"/> Against Therapist/Staff
XMJ	<input type="checkbox"/> For Prisoners

Social Security Experience Panel

Scope of the panel: members of this panel are accomplished attorneys who have sufficient training and experience to competently represent clients in Social Security Disability appeals before an Administrative Hearing Officer.

1. Litigation Experience - 5 Social Security appeals successfully litigated within the previous 5 years.

2. Legal Education or Area Experience

a) 5 hours of CLE on Social Security Disability in the past five years, if available in the State of Maine.

or

b) Active practice for 10 years before the Social Security Administration

Criteria Documentation

1) Litigation Experience

5 successful appeals within past five years.

	Case Name	Court	Date Completed
1			
2			
3			
4			
5			

2) Legal Education or Area Experience

5 hours of CLE on Social Security Disability within the past five years, if available in the State of Maine.

	Course Name	CLE Credits	Date
1			
2			
3			

OR 10 or more years Active Practice before Social Security Administration.

Certification of Information

I certify that I meet all requirements for participation on the Lawyer Referral Service *Social Security Experience Panel*, as set forth above.

Print Name: _____ Date: _____

Signature: _____

Social Security Law

XSSI SS Denial

XSSO SS Overpayment

XSSD Social Security Disability Denial



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Name _____

Veterans Benefits Representation & Appeals

Scope: The Lawyer Referral Service offers membership on its VeteransBenefits panel only to those attorneys who have satisfied all the requirements set by the U. S. Department of Veterans Affairs for representation of veterans in benefits matters.

Please attach **all** of the following:

- a copy of letter of accreditation from the Department of Veteran's Affairs;
- a copy of annual certification [38 C.F.R. §14.629(b)(4)], to be updated on each anniversary; and
- a copy of proof of 3 hours CLE credits per the schedule required by the DVA, updating as per their requirements.

Certification of Information

I certify that I meet all requirements for participation on the Lawyer Referral Service Veterans Benefits and Appeals Experience Panel, as set forth above.

Print Name: _____ Date: _____

Signature: _____

SELECT sub-categories:

- XZAC Veterans Benefits Claims
- XZAP Veterans Benefits Pension
- XZAD Veterans Benefits Disability Compensation
- XZAI Veterans Benefits Dependency and Indemnity Compensation
- XZBA Veterans Benefits Appeals

Name _____

Civil Appeals Experience Panel

Scope of the panel: members of this panel have had sufficient experience with civil appeals to be familiar with the appellate process. This code (CVA) will be used in conjunction with the originating area of law to direct referrals.

1. **Specific Appellate Experience:** (1 of 3 criteria must be met)

(a) Clerked for Appellate Court for at least one year

OR

(b) Prepared and filed an appellate brief in at least 3 cases

OR

(c) Presented oral argument before the Law Court.

Criteria Documentation

(a) Appellate clerk experience:

Court _____ From _____ to _____

(b) Prepared and filed appellate briefs:

Docket Number

Date of Filing

1) _____

2) _____

3) _____

(c) Law Court argument _____

Certification of Information

I certify that I meet all requirements for participation on the Lawyer Referral Service
Civil Appeals Experience Panel as set forth above.

Signature: _____