

**Santa Clara County Bar Association  
Lawyer Referral Service**

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

Office Address: \_\_\_\_\_  
(Zip code )

**EXPERIENCE STATEMENT - LABOR RELATIONS**

Within the last five years I have handled ( been personally responsible for ) the following matters which demonstrates in my judgment that I meet or exceed the minimum experience qualifications as specified below.

**LABOR RELATIONS QUALIFICATIONS**

**WAGES AND BENEFITS:**

1. UNEMPLOYMENT: 1 contested hearing and 3 hour course
2. LABOR COMMISSION: 2 contested hearings and 3 hour course
3. ERISA: 5 matters or 1 matter and 6 hour course
4. OSHA: 1 matter and 3 hour course

**PUBLIC SECTOR EMPLOYMENT:**

1. FEDERAL EMPLOYEES: 3 matters and 3 hour course
2. STATE EMPLOYEES: 3 matters and 3 hour course

**DISCRIMINATION:**

1. 6 matters and 6 hour course

**WRONGFUL TERMINATION:**

1. 6 matters and 6 hour course

Identification: If matter is on public record, identify court or agency and give file number, if office matter only, give office designation but omit client's name.

Date: Give month and year the required experience was completed in the matter.

**WAGES AND BENEFITS**

1. **UNEMPLOYMENT:** ( identification and date )

First Matter:\_\_\_\_\_ Date:\_\_\_\_\_

Course:\_\_\_\_\_ Date:\_\_\_\_\_

Offered By:\_\_\_\_\_

2. **LABOR COMMISSION:**

First Matter:\_\_\_\_\_ Date:\_\_\_\_\_

Second Matter:\_\_\_\_\_ Date:\_\_\_\_\_

Course:\_\_\_\_\_ Date:\_\_\_\_\_

Offered By:\_\_\_\_\_

3. **ERISA:**

First Matter:\_\_\_\_\_ Date:\_\_\_\_\_

Second Matter:\_\_\_\_\_ Date:\_\_\_\_\_

Third Matter:\_\_\_\_\_ Date:\_\_\_\_\_

Fourth Matter:\_\_\_\_\_ Date:\_\_\_\_\_

Fifth Matter:\_\_\_\_\_ Date:\_\_\_\_\_

Course:\_\_\_\_\_ Date:\_\_\_\_\_

Offered By:\_\_\_\_\_

4. **OSHA:**

First Matter:\_\_\_\_\_ Date:\_\_\_\_\_

Course:\_\_\_\_\_ Date:\_\_\_\_\_

Offered By:\_\_\_\_\_

**PUBLIC SECTOR EMPLOYMENT**

1. **FEDERAL EMPLOYEES:**

First Matter: \_\_\_\_\_ Date: \_\_\_\_\_

Second Matter: \_\_\_\_\_ Date: \_\_\_\_\_

Third Matter: \_\_\_\_\_ Date: \_\_\_\_\_

Course: \_\_\_\_\_ Date: \_\_\_\_\_

Offered By: \_\_\_\_\_ Date: \_\_\_\_\_

2. **STATE EMPLOYEES:**

First Matter: \_\_\_\_\_ Date: \_\_\_\_\_

Second Matter: \_\_\_\_\_ Date: \_\_\_\_\_

Third Matter: \_\_\_\_\_ Date: \_\_\_\_\_

Course: \_\_\_\_\_ Date: \_\_\_\_\_

Offered By: \_\_\_\_\_

3. **DISCRIMINATION:**

First Matter: \_\_\_\_\_ Date: \_\_\_\_\_

Second Matter: \_\_\_\_\_ Date: \_\_\_\_\_

Third Matter: \_\_\_\_\_ Date: \_\_\_\_\_

Fourth Matter: \_\_\_\_\_ Date: \_\_\_\_\_

Fifth Matter: \_\_\_\_\_ Date: \_\_\_\_\_

Sixth Matter: \_\_\_\_\_ Date: \_\_\_\_\_

Course: \_\_\_\_\_ Date: \_\_\_\_\_

Offered By: \_\_\_\_\_

**WRONGFUL TERMINATION:**

First Matter: \_\_\_\_\_ Date: \_\_\_\_\_

Second Matter: \_\_\_\_\_ Date: \_\_\_\_\_

Third Matter: \_\_\_\_\_ Date: \_\_\_\_\_

Fouth Matter: \_\_\_\_\_ Date: \_\_\_\_\_

Fifth Matter: \_\_\_\_\_ Date: \_\_\_\_\_

Sixth Matter: \_\_\_\_\_ Date: \_\_\_\_\_

Course Matter: \_\_\_\_\_ Date: \_\_\_\_\_

Offered By: \_\_\_\_\_

I submit the above information in support of my application for panel membership in the Lawyer Referral Service, I agree to cooperate with the Service in facilitating reasonable verification thereof and otherwise reviewing my qualifications for the Labor Relations panels under the Rules; and I further declare under penalty of perjury that the foregoing is true and correct in all respects.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Applicant