

Personal Injury Law 2011 - 2012

Subject Matter Application

(Revised 5/31/2011)

Name: (please print) _____

Are you Board Certified in Personal Injury Law? ___ yes ___ no (If yes, please indicate below the panels for which you wish to receive referrals. You are not required to provide proof of prior experience.) Please sign application.

If you are not Board Certified, please complete the application, including case information.

Where required, please provide a typed list of cases handled including case name, cause number, party names, year of disposition, brief description of case type and resolution.

Panel	Requirements
<ul style="list-style-type: none"> ___ Medical Malpractice (dental, psych., physician, pharmacy) ___ Product liability ___ Wrongful death or massive injuries ___ Professional malpractice (legal) ___ Auto collision (major injuries) ___ Toxic tort ___ Inadequate security ___ Medical devices/drugs ___ Construction site accidents ___ Nursing home abuse ___ Dog bite/animal ___ Governmental claims (TCA) ___ Sexual assault <ul style="list-style-type: none"> ___ Date rape ___ Sexual exploitation by professional ___ Police/prison brutality 	<p>For EACH selection, must have handled two (2) cases as lead attorney through discovery within the last three (3) years and</p> <p>must have handled one (1) case of any type, as lead attorney, through voir dire or jury verdict within the last five (5) years.</p> <p>Please provide list.</p> <p>___ I certify that 25% of my practice is in personal injury law and I have disclosed this percentage on my application for malpractice insurance. I further certify that I have twelve (12) hours of CLE in personal injury law in the past 3 years.</p>

For section below, you are not required to prove prior experience.

Panel	Requirements
<input type="checkbox"/> Auto collision (minor injuries) <input type="checkbox"/> Slip and fall <input type="checkbox"/> Simple assault and/or battery <input type="checkbox"/> Libel, slander, or harassment (non-employment) <input type="checkbox"/> Dog bite (minor injuries)	<input type="checkbox"/> I certify that 25% of my practice is in personal injury law and I have disclosed this percentage on my application for malpractice insurance. I certify that I have five (5) hours CLE in personal injury law in the past year.

I certify that I practice and am qualified to accept personal injury law cases. I meet the membership requirements for receiving referrals from LRS in this area and will maintain compliance with the requirements as long as I accept these referrals.

Date _____ Signature _____