

The Chartered Institute of Arbitrators

Chartered Arbitrator Application Form

Please complete all sections and return the completed form along with all supporting documents (as PDFs) via email to the Chartered Secretariat at [chartered@ciarb.org](mailto:chartered@ciarb.org). For assistance or information, please either email or call + 44 (0)20 7421 7447.

**Application checklist**

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| --- | --- | --- | --- |
| **No** | **Submission Requirements** | | **Action** |
| **1.0** | **Application form** | Personal information section. | Completed / Outstanding |
| Section One - List of fifteen (15) arbitration cases with all the requested details. | Completed / Outstanding |
| Section Two - Narrative description of practice (1,000 words maximum). | Completed / Outstanding |
| Section Three - Self-assessment against the Chartered Arbitrator Excellence Framework. | Completed / Outstanding |
| Section Four - Details of ongoing learning activity (CPD/CLE) undertaken in the last three (3) years. | Completed / Outstanding |
| Section Five - Declaration. | Completed / Outstanding |
| Application form saved in PDF format. | Completed / Outstanding |
| **2.0** | **Attachments** | Five (5) reasoned arbitration awards written by the applicant that have been redacted, saved in PDF format and files labelled according to the format requested: AA-[MembershipNumber]-[Surname]-01 to 05 | Completed / Outstanding |
| **3.0** | **Attachments** | Five (5) procedural orders written by the applicant that have been redacted, saved in PDF format and labelled according to the format requested: PO-[MembershipNumber]-[Surname]-01 to 05 | Completed / Outstanding |
| **4.0** | **Payment method** | Payment method preference for the application fee of £1,500. | Completed / Outstanding |

\**Please input your answer and delete other options*

|  |  |
| --- | --- |
| **PERSONAL INFORMATION** | |
| Ciarb membership number | [TYPE YOUR INPUT HERE] |
| Title | [TYPE YOUR INPUT HERE] |
| Surname | [TYPE YOUR INPUT HERE] |
| Forename(s) | [TYPE YOUR INPUT HERE] |
| Email address  ***\*Please use the email address that is linked to your Ciarb account*** | [TYPE YOUR INPUT HERE] |
| Telephone number (including country code) | [TYPE YOUR INPUT HERE] |
| Country of residence | [TYPE YOUR INPUT HERE] |
| Postal address | [TYPE YOUR INPUT HERE] |
| Preferred time-zone for interview (if applicable) | [TYPE YOUR INPUT HERE] |
| Disability information (if applicable) | [TYPE YOUR INPUT HERE] |
| Additional request / Information (if applicable) | [TYPE YOUR INPUT HERE] |

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| **SECTION ONE: LIST OF IMPORTANT CASES**  **List of fifteen (15) arbitration cases completed in the last ten (10) years.** |

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| **Case One (1)** | | |
| Case name or case reference | [TYPE YOUR INPUT HERE] | |
| Type of case | [TYPE YOUR INPUT HERE] *(International or Domestic Arbitration)* | |
| Sector the dispute relates to | [TYPE YOUR INPUT HERE] *(e.g., Construction, Maritime, Banking, or others)* | |
| Your role in the case | [TYPE YOUR INPUT HERE] *(Sole Arbitrator / Co-Arbitrator / Chair of Tribunal)* | |
| Your route to being appointed as an arbitrator | [TYPE YOUR INPUT HERE] *(Arbitral Institution / Ad Hoc / Party Appointment)* | |
| The start date for the case | [TYPE YOUR INPUT HERE] *(DD/MM/YYYY)* | |
| Completion date | [TYPE YOUR INPUT HERE] *(DD/MM/YYYY)* | |
| Please state the dispute value of the case | [TYPE YOUR INPUT HERE]  *(If less than £400,000.00 please provide an explanation as to why this was a difficult and complex case.)* | |
| Please provide contact details for **AT LEAST** one referee from the following categories. The individual(s) must be able to provide useful evidence relating your handling of the case: | | |
| Party Counsel | Full name | [TYPE YOUR INPUT HERE] |
| Email address | [TYPE YOUR INPUT HERE] |
| Telephone number | [TYPE YOUR INPUT HERE] |
| Postal address | [TYPE YOUR INPUT HERE] |
| Party (if appropriate) | Full name | [TYPE YOUR INPUT HERE] |
| Email address | [TYPE YOUR INPUT HERE] |
| Telephone number | [TYPE YOUR INPUT HERE] |
| Postal address | [TYPE YOUR INPUT HERE] |
| Co-arbitrator (if relevant) | Full name | [TYPE YOUR INPUT HERE] |
| Email address | [TYPE YOUR INPUT HERE] |
| Telephone number | [TYPE YOUR INPUT HERE] |
| Postal address | [TYPE YOUR INPUT HERE] |
| Institutional representative  (Or another role, please specify) | Full name | [TYPE YOUR INPUT HERE] |
| Email address | [TYPE YOUR INPUT HERE] |
| Telephone number | [TYPE YOUR INPUT HERE] |
| Postal address | [TYPE YOUR INPUT HERE] |
| Any information about your relationship with any of the referees above that the Chartered Selection Group (CSG) should know about. | | |
| [TYPE YOUR INPUT HERE] | | |
| Please provide a brief description of the case that is sufficient to remind a potential referee of their interaction with you but does not reveal information that would breach the privacy and confidentiality of the dispute process. (Maximum of 250 words) | | |
| [TYPE YOUR INPUT HERE] | | |

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| **Case Two (2)** | | |
| Case name or case reference | [TYPE YOUR INPUT HERE] | |
| Type of case | [TYPE YOUR INPUT HERE] *(International or Domestic Arbitration)* | |
| Sector the dispute relates to | [TYPE YOUR INPUT HERE] *(e.g., Construction, Maritime, Banking, or others)* | |
| Your role in the case | [TYPE YOUR INPUT HERE] *(Sole Arbitrator / Co-Arbitrator / Chair of Tribunal)* | |
| Your route to being appointed as an arbitrator | [TYPE YOUR INPUT HERE] *(Arbitral Institution / Ad Hoc / Party Appointment)* | |
| The start date for the case | [TYPE YOUR INPUT HERE] *(DD/MM/YYYY)* | |
| Completion date | [TYPE YOUR INPUT HERE] *(DD/MM/YYYY)* | |
| Please state the dispute value of the case | [TYPE YOUR INPUT HERE]  *(If less than £400,000.00 please provide an explanation as to why this was a difficult and complex case.)* | |
| Please provide contact details for **AT LEAST** one referee from the following categories. The individual(s) must be able to provide useful evidence relating your handling of the case: | | |
| Party Counsel | Full name | [TYPE YOUR INPUT HERE] |
| Email address | [TYPE YOUR INPUT HERE] |
| Telephone number | [TYPE YOUR INPUT HERE] |
| Postal address | [TYPE YOUR INPUT HERE] |
| Party (if appropriate) | Full name | [TYPE YOUR INPUT HERE] |
| Email address | [TYPE YOUR INPUT HERE] |
| Telephone number | [TYPE YOUR INPUT HERE] |
| Postal address | [TYPE YOUR INPUT HERE] |
| Co-arbitrator (if relevant) | Full name | [TYPE YOUR INPUT HERE] |
| Email address | [TYPE YOUR INPUT HERE] |
| Telephone number | [TYPE YOUR INPUT HERE] |
| Postal address | [TYPE YOUR INPUT HERE] |
| Institutional representative  (Or another role, please specify) | Full name | [TYPE YOUR INPUT HERE] |
| Email address | [TYPE YOUR INPUT HERE] |
| Telephone number | [TYPE YOUR INPUT HERE] |
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| [TYPE YOUR INPUT HERE] | | |

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| **Case Three (3)** | | |
| Case name or case reference | [TYPE YOUR INPUT HERE] | |
| Type of case | [TYPE YOUR INPUT HERE] *(International or Domestic Arbitration)* | |
| Sector the dispute relates to | [TYPE YOUR INPUT HERE] *(e.g., Construction, Maritime, Banking, or others)* | |
| Your role in the case | [TYPE YOUR INPUT HERE] *(Sole Arbitrator / Co-Arbitrator / Chair of Tribunal)* | |
| Your route to being appointed as an arbitrator | [TYPE YOUR INPUT HERE] *(Arbitral Institution / Ad Hoc / Party Appointment)* | |
| The start date for the case | [TYPE YOUR INPUT HERE] *(DD/MM/YYYY)* | |
| Completion date | [TYPE YOUR INPUT HERE] *(DD/MM/YYYY)* | |
| Please state the dispute value of the case | [TYPE YOUR INPUT HERE]  *(If less than £400,000.00 please provide an explanation as to why this was a difficult and complex case.)* | |
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| Party Counsel | Full name | [TYPE YOUR INPUT HERE] |
| Email address | [TYPE YOUR INPUT HERE] |
| Telephone number | [TYPE YOUR INPUT HERE] |
| Postal address | [TYPE YOUR INPUT HERE] |
| Party (if appropriate) | Full name | [TYPE YOUR INPUT HERE] |
| Email address | [TYPE YOUR INPUT HERE] |
| Telephone number | [TYPE YOUR INPUT HERE] |
| Postal address | [TYPE YOUR INPUT HERE] |
| Co-arbitrator (if relevant) | Full name | [TYPE YOUR INPUT HERE] |
| Email address | [TYPE YOUR INPUT HERE] |
| Telephone number | [TYPE YOUR INPUT HERE] |
| Postal address | [TYPE YOUR INPUT HERE] |
| Institutional representative  (Or another role, please specify) | Full name | [TYPE YOUR INPUT HERE] |
| Email address | [TYPE YOUR INPUT HERE] |
| Telephone number | [TYPE YOUR INPUT HERE] |
| Postal address | [TYPE YOUR INPUT HERE] |
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| [TYPE YOUR INPUT HERE] | | |
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| [TYPE YOUR INPUT HERE] | | |

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| **Case Four (4)** | | |
| Case name or case reference | [TYPE YOUR INPUT HERE] | |
| Type of case | [TYPE YOUR INPUT HERE] *(International or Domestic Arbitration)* | |
| Sector the dispute relates to | [TYPE YOUR INPUT HERE] *(e.g., Construction, Maritime, Banking, or others)* | |
| Your role in the case | [TYPE YOUR INPUT HERE] *(Sole Arbitrator / Co-Arbitrator / Chair of Tribunal)* | |
| Your route to being appointed as an arbitrator | [TYPE YOUR INPUT HERE] *(Arbitral Institution / Ad Hoc / Party Appointment)* | |
| The start date for the case | [TYPE YOUR INPUT HERE] *(DD/MM/YYYY)* | |
| Completion date | [TYPE YOUR INPUT HERE] *(DD/MM/YYYY)* | |
| Please state the dispute value of the case | [TYPE YOUR INPUT HERE]  *(If less than £400,000.00 please provide an explanation as to why this was a difficult and complex case.)* | |
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| Party Counsel | Full name | [TYPE YOUR INPUT HERE] |
| Email address | [TYPE YOUR INPUT HERE] |
| Telephone number | [TYPE YOUR INPUT HERE] |
| Postal address | [TYPE YOUR INPUT HERE] |
| Party (if appropriate) | Full name | [TYPE YOUR INPUT HERE] |
| Email address | [TYPE YOUR INPUT HERE] |
| Telephone number | [TYPE YOUR INPUT HERE] |
| Postal address | [TYPE YOUR INPUT HERE] |
| Co-arbitrator (if relevant) | Full name | [TYPE YOUR INPUT HERE] |
| Email address | [TYPE YOUR INPUT HERE] |
| Telephone number | [TYPE YOUR INPUT HERE] |
| Postal address | [TYPE YOUR INPUT HERE] |
| Institutional representative  (Or another role, please specify) | Full name | [TYPE YOUR INPUT HERE] |
| Email address | [TYPE YOUR INPUT HERE] |
| Telephone number | [TYPE YOUR INPUT HERE] |
| Postal address | [TYPE YOUR INPUT HERE] |
| Any information about your relationship with any of the referees above that the Chartered Selection Group (CSG) should know about. | | |
| [TYPE YOUR INPUT HERE] | | |
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| [TYPE YOUR INPUT HERE] | | |

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| **Case Five (5)** | | |
| Case name or case reference | [TYPE YOUR INPUT HERE] | |
| Type of case | [TYPE YOUR INPUT HERE] *(International or Domestic Arbitration)* | |
| Sector the dispute relates to | [TYPE YOUR INPUT HERE] *(e.g., Construction, Maritime, Banking, or others)* | |
| Your role in the case | [TYPE YOUR INPUT HERE] *(Sole Arbitrator / Co-Arbitrator / Chair of Tribunal)* | |
| Your route to being appointed as an arbitrator | [TYPE YOUR INPUT HERE] *(Arbitral Institution / Ad Hoc / Party Appointment)* | |
| The start date for the case | [TYPE YOUR INPUT HERE] *(DD/MM/YYYY)* | |
| Completion date | [TYPE YOUR INPUT HERE] *(DD/MM/YYYY)* | |
| Please state the dispute value of the case | [TYPE YOUR INPUT HERE]  *(If less than £400,000.00 please provide an explanation as to why this was a difficult and complex case.)* | |
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| Party Counsel | Full name | [TYPE YOUR INPUT HERE] |
| Email address | [TYPE YOUR INPUT HERE] |
| Telephone number | [TYPE YOUR INPUT HERE] |
| Postal address | [TYPE YOUR INPUT HERE] |
| Party (if appropriate) | Full name | [TYPE YOUR INPUT HERE] |
| Email address | [TYPE YOUR INPUT HERE] |
| Telephone number | [TYPE YOUR INPUT HERE] |
| Postal address | [TYPE YOUR INPUT HERE] |
| Co-arbitrator (if relevant) | Full name | [TYPE YOUR INPUT HERE] |
| Email address | [TYPE YOUR INPUT HERE] |
| Telephone number | [TYPE YOUR INPUT HERE] |
| Postal address | [TYPE YOUR INPUT HERE] |
| Institutional representative  (Or another role, please specify) | Full name | [TYPE YOUR INPUT HERE] |
| Email address | [TYPE YOUR INPUT HERE] |
| Telephone number | [TYPE YOUR INPUT HERE] |
| Postal address | [TYPE YOUR INPUT HERE] |
| Any information about your relationship with any of the referees above that the Chartered Selection Group (CSG) should know about. | | |
| [TYPE YOUR INPUT HERE] | | |
| Please provide a brief description of the case that is sufficient to remind a potential referee of their interaction with you but does not reveal information that would breach the privacy and confidentiality of the dispute process. (Maximum of 250 words) | | |
| [TYPE YOUR INPUT HERE] | | |

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| **Case Six (6)** | | |
| Case name or case reference | [TYPE YOUR INPUT HERE] | |
| Type of case | [TYPE YOUR INPUT HERE] *(International or Domestic Arbitration)* | |
| Sector the dispute relates to | [TYPE YOUR INPUT HERE] *(e.g., Construction, Maritime, Banking, or others)* | |
| Your role in the case | [TYPE YOUR INPUT HERE] *(Sole Arbitrator / Co-Arbitrator / Chair of Tribunal)* | |
| Your route to being appointed as an arbitrator | [TYPE YOUR INPUT HERE] *(Arbitral Institution / Ad Hoc / Party Appointment)* | |
| The start date for the case | [TYPE YOUR INPUT HERE] *(DD/MM/YYYY)* | |
| Completion date | [TYPE YOUR INPUT HERE] *(DD/MM/YYYY)* | |
| Please state the dispute value of the case | [TYPE YOUR INPUT HERE]  *(If less than £400,000.00 please provide an explanation as to why this was a difficult and complex case.)* | |
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| Party Counsel | Full name | [TYPE YOUR INPUT HERE] |
| Email address | [TYPE YOUR INPUT HERE] |
| Telephone number | [TYPE YOUR INPUT HERE] |
| Postal address | [TYPE YOUR INPUT HERE] |
| Party (if appropriate) | Full name | [TYPE YOUR INPUT HERE] |
| Email address | [TYPE YOUR INPUT HERE] |
| Telephone number | [TYPE YOUR INPUT HERE] |
| Postal address | [TYPE YOUR INPUT HERE] |
| Co-arbitrator (if relevant) | Full name | [TYPE YOUR INPUT HERE] |
| Email address | [TYPE YOUR INPUT HERE] |
| Telephone number | [TYPE YOUR INPUT HERE] |
| Postal address | [TYPE YOUR INPUT HERE] |
| Institutional representative  (Or another role, please specify) | Full name | [TYPE YOUR INPUT HERE] |
| Email address | [TYPE YOUR INPUT HERE] |
| Telephone number | [TYPE YOUR INPUT HERE] |
| Postal address | [TYPE YOUR INPUT HERE] |
| Any information about your relationship with any of the referees above that the Chartered Selection Group (CSG) should know about. | | |
| [TYPE YOUR INPUT HERE] | | |
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| [TYPE YOUR INPUT HERE] | | |

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| **Case Seven (7)** | | |
| Case name or case reference | [TYPE YOUR INPUT HERE] | |
| Type of case | [TYPE YOUR INPUT HERE] *(International or Domestic Arbitration)* | |
| Sector the dispute relates to | [TYPE YOUR INPUT HERE] *(e.g., Construction, Maritime, Banking, or others)* | |
| Your role in the case | [TYPE YOUR INPUT HERE] *(Sole Arbitrator / Co-Arbitrator / Chair of Tribunal)* | |
| Your route to being appointed as an arbitrator | [TYPE YOUR INPUT HERE] *(Arbitral Institution / Ad Hoc / Party Appointment)* | |
| The start date for the case | [TYPE YOUR INPUT HERE] *(DD/MM/YYYY)* | |
| Completion date | [TYPE YOUR INPUT HERE] *(DD/MM/YYYY)* | |
| Please state the dispute value of the case | [TYPE YOUR INPUT HERE]  *(If less than £400,000.00 please provide an explanation as to why this was a difficult and complex case.)* | |
| Please provide contact details for **AT LEAST** one referee from the following categories. The individual(s) must be able to provide useful evidence relating your handling of the case: | | |
| Party Counsel | Full name | [TYPE YOUR INPUT HERE] |
| Email address | [TYPE YOUR INPUT HERE] |
| Telephone number | [TYPE YOUR INPUT HERE] |
| Postal address | [TYPE YOUR INPUT HERE] |
| Party (if appropriate) | Full name | [TYPE YOUR INPUT HERE] |
| Email address | [TYPE YOUR INPUT HERE] |
| Telephone number | [TYPE YOUR INPUT HERE] |
| Postal address | [TYPE YOUR INPUT HERE] |
| Co-arbitrator (if relevant) | Full name | [TYPE YOUR INPUT HERE] |
| Email address | [TYPE YOUR INPUT HERE] |
| Telephone number | [TYPE YOUR INPUT HERE] |
| Postal address | [TYPE YOUR INPUT HERE] |
| Institutional representative  (Or another role, please specify) | Full name | [TYPE YOUR INPUT HERE] |
| Email address | [TYPE YOUR INPUT HERE] |
| Telephone number | [TYPE YOUR INPUT HERE] |
| Postal address | [TYPE YOUR INPUT HERE] |
| Any information about your relationship with any of the referees above that the Chartered Selection Group (CSG) should know about. | | |
| [TYPE YOUR INPUT HERE] | | |
| Please provide a brief description of the case that is sufficient to remind a potential referee of their interaction with you but does not reveal information that would breach the privacy and confidentiality of the dispute process. (Maximum of 250 words) | | |
| [TYPE YOUR INPUT HERE] | | |

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| **Case Eight (8)** | | |
| Case name or case reference | [TYPE YOUR INPUT HERE] | |
| Type of case | [TYPE YOUR INPUT HERE] *(International or Domestic Arbitration)* | |
| Sector the dispute relates to | [TYPE YOUR INPUT HERE] *(e.g., Construction, Maritime, Banking, or others)* | |
| Your role in the case | [TYPE YOUR INPUT HERE] *(Sole Arbitrator / Co-Arbitrator / Chair of Tribunal)* | |
| Your route to being appointed as an arbitrator | [TYPE YOUR INPUT HERE] *(Arbitral Institution / Ad Hoc / Party Appointment)* | |
| The start date for the case | [TYPE YOUR INPUT HERE] *(DD/MM/YYYY)* | |
| Completion date | [TYPE YOUR INPUT HERE] *(DD/MM/YYYY)* | |
| Please state the dispute value of the case | [TYPE YOUR INPUT HERE]  *(If less than £400,000.00 please provide an explanation as to why this was a difficult and complex case.)* | |
| Please provide contact details for **AT LEAST** one referee from the following categories. The individual(s) must be able to provide useful evidence relating your handling of the case: | | |
| Party Counsel | Full name | [TYPE YOUR INPUT HERE] |
| Email address | [TYPE YOUR INPUT HERE] |
| Telephone number | [TYPE YOUR INPUT HERE] |
| Postal address | [TYPE YOUR INPUT HERE] |
| Party (if appropriate) | Full name | [TYPE YOUR INPUT HERE] |
| Email address | [TYPE YOUR INPUT HERE] |
| Telephone number | [TYPE YOUR INPUT HERE] |
| Postal address | [TYPE YOUR INPUT HERE] |
| Co-arbitrator (if relevant) | Full name | [TYPE YOUR INPUT HERE] |
| Email address | [TYPE YOUR INPUT HERE] |
| Telephone number | [TYPE YOUR INPUT HERE] |
| Postal address | [TYPE YOUR INPUT HERE] |
| Institutional representative  (Or another role, please specify) | Full name | [TYPE YOUR INPUT HERE] |
| Email address | [TYPE YOUR INPUT HERE] |
| Telephone number | [TYPE YOUR INPUT HERE] |
| Postal address | [TYPE YOUR INPUT HERE] |
| Any information about your relationship with any of the referees above that the Chartered Selection Group (CSG) should know about. | | |
| [TYPE YOUR INPUT HERE] | | |
| Please provide a brief description of the case that is sufficient to remind a potential referee of their interaction with you but does not reveal information that would breach the privacy and confidentiality of the dispute process. (Maximum of 250 words) | | |
| [TYPE YOUR INPUT HERE] | | |

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| **Case Nine (9)** | | |
| Case name or case reference | [TYPE YOUR INPUT HERE] | |
| Type of case | [TYPE YOUR INPUT HERE] *(International or Domestic Arbitration)* | |
| Sector the dispute relates to | [TYPE YOUR INPUT HERE] *(e.g., Construction, Maritime, Banking, or others)* | |
| Your role in the case | [TYPE YOUR INPUT HERE] *(Sole Arbitrator / Co-Arbitrator / Chair of Tribunal)* | |
| Your route to being appointed as an arbitrator | [TYPE YOUR INPUT HERE] *(Arbitral Institution / Ad Hoc / Party Appointment)* | |
| The start date for the case | [TYPE YOUR INPUT HERE] *(DD/MM/YYYY)* | |
| Completion date | [TYPE YOUR INPUT HERE] *(DD/MM/YYYY)* | |
| Please state the dispute value of the case | [TYPE YOUR INPUT HERE]  *(If less than £400,000.00 please provide an explanation as to why this was a difficult and complex case.)* | |
| Please provide contact details for **AT LEAST** one referee from the following categories. The individual(s) must be able to provide useful evidence relating your handling of the case: | | |
| Party Counsel | Full name | [TYPE YOUR INPUT HERE] |
| Email address | [TYPE YOUR INPUT HERE] |
| Telephone number | [TYPE YOUR INPUT HERE] |
| Postal address | [TYPE YOUR INPUT HERE] |
| Party (if appropriate) | Full name | [TYPE YOUR INPUT HERE] |
| Email address | [TYPE YOUR INPUT HERE] |
| Telephone number | [TYPE YOUR INPUT HERE] |
| Postal address | [TYPE YOUR INPUT HERE] |
| Co-arbitrator (if relevant) | Full name | [TYPE YOUR INPUT HERE] |
| Email address | [TYPE YOUR INPUT HERE] |
| Telephone number | [TYPE YOUR INPUT HERE] |
| Postal address | [TYPE YOUR INPUT HERE] |
| Institutional representative  (Or another role, please specify) | Full name | [TYPE YOUR INPUT HERE] |
| Email address | [TYPE YOUR INPUT HERE] |
| Telephone number | [TYPE YOUR INPUT HERE] |
| Postal address | [TYPE YOUR INPUT HERE] |
| Any information about your relationship with any of the referees above that the Chartered Selection Group (CSG) should know about. | | |
| [TYPE YOUR INPUT HERE] | | |
| Please provide a brief description of the case that is sufficient to remind a potential referee of their interaction with you but does not reveal information that would breach the privacy and confidentiality of the dispute process. (Maximum of 250 words) | | |
| [TYPE YOUR INPUT HERE] | | |

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| --- | --- | --- |
| **Case Ten (10)** | | |
| Case name or case reference | [TYPE YOUR INPUT HERE] | |
| Type of case | [TYPE YOUR INPUT HERE] *(International or Domestic Arbitration)* | |
| Sector the dispute relates to | [TYPE YOUR INPUT HERE] *(e.g., Construction, Maritime, Banking, or others)* | |
| Your role in the case | [TYPE YOUR INPUT HERE] *(Sole Arbitrator / Co-Arbitrator / Chair of Tribunal)* | |
| Your route to being appointed as an arbitrator | [TYPE YOUR INPUT HERE] *(Arbitral Institution / Ad Hoc / Party Appointment)* | |
| The start date for the case | [TYPE YOUR INPUT HERE] *(DD/MM/YYYY)* | |
| Completion date | [TYPE YOUR INPUT HERE] *(DD/MM/YYYY)* | |
| Please state the dispute value of the case | [TYPE YOUR INPUT HERE]  *(If less than £400,000.00 please provide an explanation as to why this was a difficult and complex case.)* | |
| Please provide contact details for **AT LEAST** one referee from the following categories. The individual(s) must be able to provide useful evidence relating your handling of the case: | | |
| Party Counsel | Full name | [TYPE YOUR INPUT HERE] |
| Email address | [TYPE YOUR INPUT HERE] |
| Telephone number | [TYPE YOUR INPUT HERE] |
| Postal address | [TYPE YOUR INPUT HERE] |
| Party (if appropriate) | Full name | [TYPE YOUR INPUT HERE] |
| Email address | [TYPE YOUR INPUT HERE] |
| Telephone number | [TYPE YOUR INPUT HERE] |
| Postal address | [TYPE YOUR INPUT HERE] |
| Co-arbitrator (if relevant) | Full name | [TYPE YOUR INPUT HERE] |
| Email address | [TYPE YOUR INPUT HERE] |
| Telephone number | [TYPE YOUR INPUT HERE] |
| Postal address | [TYPE YOUR INPUT HERE] |
| Institutional representative  (Or another role, please specify) | Full name | [TYPE YOUR INPUT HERE] |
| Email address | [TYPE YOUR INPUT HERE] |
| Telephone number | [TYPE YOUR INPUT HERE] |
| Postal address | [TYPE YOUR INPUT HERE] |
| Any information about your relationship with any of the referees above that the Chartered Selection Group (CSG) should know about. | | |
| [TYPE YOUR INPUT HERE] | | |
| Please provide a brief description of the case that is sufficient to remind a potential referee of their interaction with you but does not reveal information that would breach the privacy and confidentiality of the dispute process. (Maximum of 250 words) | | |
| [TYPE YOUR INPUT HERE] | | |

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| **Case Eleven (11)** | | |
| Case name or case reference | [TYPE YOUR INPUT HERE] | |
| Type of case | [TYPE YOUR INPUT HERE] *(International or Domestic Arbitration)* | |
| Sector the dispute relates to | [TYPE YOUR INPUT HERE] *(e.g., Construction, Maritime, Banking, or others)* | |
| Your role in the case | [TYPE YOUR INPUT HERE] *(Sole Arbitrator / Co-Arbitrator / Chair of Tribunal)* | |
| Your route to being appointed as an arbitrator | [TYPE YOUR INPUT HERE] *(Arbitral Institution / Ad Hoc / Party Appointment)* | |
| Case start date | [TYPE YOUR INPUT HERE] *(DD/MM/YYYY)* | |
| Case completion date | [TYPE YOUR INPUT HERE] *(DD/MM/YYYY)* | |
| Please state the dispute value of the case | [TYPE YOUR INPUT HERE]  *(If less than £400,000.00 please provide an explanation as to why this was a difficult and complex case.)* | |
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| Party Counsel | Full name | [TYPE YOUR INPUT HERE] |
| Email address | [TYPE YOUR INPUT HERE] |
| Telephone number | [TYPE YOUR INPUT HERE] |
| Postal address | [TYPE YOUR INPUT HERE] |
| Party (if appropriate) | Full name | [TYPE YOUR INPUT HERE] |
| Email address | [TYPE YOUR INPUT HERE] |
| Telephone number | [TYPE YOUR INPUT HERE] |
| Postal address | [TYPE YOUR INPUT HERE] |
| Co-arbitrator (if relevant) | Full name | [TYPE YOUR INPUT HERE] |
| Email address | [TYPE YOUR INPUT HERE] |
| Telephone number | [TYPE YOUR INPUT HERE] |
| Postal address | [TYPE YOUR INPUT HERE] |
| Institutional representative  (Or another role, please specify) | Full name | [TYPE YOUR INPUT HERE] |
| Email address | [TYPE YOUR INPUT HERE] |
| Telephone number | [TYPE YOUR INPUT HERE] |
| Postal address | [TYPE YOUR INPUT HERE] |
| Any information about your relationship with any of the referees above that the Chartered Selection Group (CSG) should know about. | | |
| [TYPE YOUR INPUT HERE] | | |
| Please provide a brief description of the case that is sufficient to remind a potential referee of their interaction with you but does not reveal information that would breach the privacy and confidentiality of the dispute process. (Maximum of 250 words) | | |
| [TYPE YOUR INPUT HERE] | | |

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| **Case Twelve (12)** | | |
| Case name or case reference | [TYPE YOUR INPUT HERE] | |
| Type of case | [TYPE YOUR INPUT HERE] *(International or Domestic Arbitration)* | |
| Sector the dispute relates to | [TYPE YOUR INPUT HERE] *(e.g., Construction, Maritime, Banking, or others)* | |
| Your role in the case | [TYPE YOUR INPUT HERE] *(Sole Arbitrator / Co-Arbitrator / Chair of Tribunal)* | |
| Your route to being appointed as an arbitrator. | [TYPE YOUR INPUT HERE] *(Arbitral Institution / Ad Hoc / Party Appointment)* | |
| The Start Date for the case. | [TYPE YOUR INPUT HERE] *(DD/MM/YYYY)* | |
| Completion date | [TYPE YOUR INPUT HERE] *(DD/MM/YYYY)* | |
| Please state the dispute value of the case | [TYPE YOUR INPUT HERE]  *(If less than £400,000.00 please provide an explanation as to why this was a difficult and complex case.)* | |
| Please provide contact details for **AT LEAST** one referee from the following categories. The individual(s) must be able to provide useful evidence relating your handling of the case: | | |
| Party Counsel | Full name | [TYPE YOUR INPUT HERE] |
| Email address | [TYPE YOUR INPUT HERE] |
| Telephone number | [TYPE YOUR INPUT HERE] |
| Postal address | [TYPE YOUR INPUT HERE] |
| Party (if appropriate) | Full name | [TYPE YOUR INPUT HERE] |
| Email address | [TYPE YOUR INPUT HERE] |
| Telephone number | [TYPE YOUR INPUT HERE] |
| Postal address | [TYPE YOUR INPUT HERE] |
| Co-arbitrator (if relevant) | Full name | [TYPE YOUR INPUT HERE] |
| Email address | [TYPE YOUR INPUT HERE] |
| Telephone number | [TYPE YOUR INPUT HERE] |
| Postal address | [TYPE YOUR INPUT HERE] |
| Institutional representative  (Or another role, please specify) | Full name | [TYPE YOUR INPUT HERE] |
| Email address | [TYPE YOUR INPUT HERE] |
| Telephone number | [TYPE YOUR INPUT HERE] |
| Postal address | [TYPE YOUR INPUT HERE] |
| Any information about your relationship with any of the referees above that the Chartered Selection Group (CSG) should know about. | | |
| [TYPE YOUR INPUT HERE] | | |
| Please provide a brief description of the case that is sufficient to remind a potential referee of their interaction with you but does not reveal information that would breach the privacy and confidentiality of the dispute process. (Maximum of 250 words) | | |
| [TYPE YOUR INPUT HERE] | | |

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| **Case Thirteen (13)** | | |
| Case name or case reference | [TYPE YOUR INPUT HERE] | |
| Type of case | [TYPE YOUR INPUT HERE] *(International or Domestic Arbitration)* | |
| Sector the dispute relates to | [TYPE YOUR INPUT HERE] *(e.g., Construction, Maritime, Banking, or others)* | |
| Your role in the case | [TYPE YOUR INPUT HERE] *(Sole Arbitrator / Co-Arbitrator / Chair of Tribunal)* | |
| Your route to being appointed as an arbitrator. | [TYPE YOUR INPUT HERE] *(Arbitral Institution / Ad Hoc / Party Appointment)* | |
| The Start Date for the case. | [TYPE YOUR INPUT HERE] *(DD/MM/YYYY)* | |
| Completion date | [TYPE YOUR INPUT HERE] *(DD/MM/YYYY)* | |
| Please state the dispute value of the case | [TYPE YOUR INPUT HERE]  *(If less than £400,000.00 please provide an explanation as to why this was a difficult and complex case.)* | |
| Please provide contact details for **AT LEAST** one referee from the following categories. The individual(s) must be able to provide useful evidence relating your handling of the case: | | |
| Party Counsel | Full name | [TYPE YOUR INPUT HERE] |
| Email address | [TYPE YOUR INPUT HERE] |
| Telephone number | [TYPE YOUR INPUT HERE] |
| Postal address | [TYPE YOUR INPUT HERE] |
| Party (if appropriate) | Full name | [TYPE YOUR INPUT HERE] |
| Email address | [TYPE YOUR INPUT HERE] |
| Telephone number | [TYPE YOUR INPUT HERE] |
| Postal address | [TYPE YOUR INPUT HERE] |
| Co-arbitrator (if relevant) | Full name | [TYPE YOUR INPUT HERE] |
| Email address | [TYPE YOUR INPUT HERE] |
| Telephone number | [TYPE YOUR INPUT HERE] |
| Postal address | [TYPE YOUR INPUT HERE] |
| Institutional representative  (Or another role, please specify) | Full name | [TYPE YOUR INPUT HERE] |
| Email address | [TYPE YOUR INPUT HERE] |
| Telephone number | [TYPE YOUR INPUT HERE] |
| Postal address | [TYPE YOUR INPUT HERE] |
| Any information about your relationship with any of the referees above that the Chartered Selection Group (CSG) should know about. | | |
| [TYPE YOUR INPUT HERE] | | |
| Please provide a brief description of the case that is sufficient to remind a potential referee of their interaction with you but does not reveal information that would breach the privacy and confidentiality of the dispute process. (Maximum of 250 words) | | |
| [TYPE YOUR INPUT HERE] | | |

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| **Case Fourteen (14)** | | |
| Case name or case reference | [TYPE YOUR INPUT HERE] | |
| Type of case | [TYPE YOUR INPUT HERE] *(International or Domestic Arbitration)* | |
| Sector the dispute relates to | [TYPE YOUR INPUT HERE] *(e.g., Construction, Maritime, Banking, or others)* | |
| Your role in the case | [TYPE YOUR INPUT HERE] *(Sole Arbitrator / Co-Arbitrator / Chair of Tribunal)* | |
| Your route to being appointed as an arbitrator. | [TYPE YOUR INPUT HERE] *(Arbitral Institution / Ad Hoc / Party Appointment)* | |
| The Start Date for the case. | [TYPE YOUR INPUT HERE] *(DD/MM/YYYY)* | |
| Completion date | [TYPE YOUR INPUT HERE] *(DD/MM/YYYY)* | |
| Please state the dispute value of the case | [TYPE YOUR INPUT HERE]  *(If less than £400,000.00 please provide an explanation as to why this was a difficult and complex case.)* | |
| Please provide contact details for **AT LEAST** one referee from the following categories. The individual(s) must be able to provide useful evidence relating your handling of the case: | | |
| Party Counsel | Full name | [TYPE YOUR INPUT HERE] |
| Email address | [TYPE YOUR INPUT HERE] |
| Telephone number | [TYPE YOUR INPUT HERE] |
| Postal address | [TYPE YOUR INPUT HERE] |
| Party (if appropriate) | Full name | [TYPE YOUR INPUT HERE] |
| Email address | [TYPE YOUR INPUT HERE] |
| Telephone number | [TYPE YOUR INPUT HERE] |
| Postal address | [TYPE YOUR INPUT HERE] |
| Co-arbitrator (if relevant) | Full name | [TYPE YOUR INPUT HERE] |
| Email address | [TYPE YOUR INPUT HERE] |
| Telephone number | [TYPE YOUR INPUT HERE] |
| Postal address | [TYPE YOUR INPUT HERE] |
| Institutional representative  (Or another role, please specify) | Full name | [TYPE YOUR INPUT HERE] |
| Email address | [TYPE YOUR INPUT HERE] |
| Telephone number | [TYPE YOUR INPUT HERE] |
| Postal address | [TYPE YOUR INPUT HERE] |
| Any information about your relationship with any of the referees above that the Chartered Selection Group (CSG) should know about. | | |
| [TYPE YOUR INPUT HERE] | | |
| Please provide a brief description of the case that is sufficient to remind a potential referee of their interaction with you but does not reveal information that would breach the privacy and confidentiality of the dispute process. (Maximum of 250 words) | | |
| [TYPE YOUR INPUT HERE] | | |

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| **Case Fifteen (15)** | | |
| Case name or case reference | [TYPE YOUR INPUT HERE] | |
| Type of case | [TYPE YOUR INPUT HERE] *(International or Domestic Arbitration)* | |
| Sector the dispute relates to | [TYPE YOUR INPUT HERE] *(e.g., Construction, Maritime, Banking, or others)* | |
| Your role in the case | [TYPE YOUR INPUT HERE] *(Sole Arbitrator / Co-Arbitrator / Chair of Tribunal)* | |
| Your route to being appointed as an arbitrator. | [TYPE YOUR INPUT HERE] *(Arbitral Institution / Ad Hoc / Party Appointment)* | |
| The Start Date for the case. | [TYPE YOUR INPUT HERE] *(DD/MM/YYYY)* | |
| Completion date | [TYPE YOUR INPUT HERE] *(DD/MM/YYYY)* | |
| Please state the dispute value of the case | [TYPE YOUR INPUT HERE]  *(If less than £400,000.00 please provide an explanation as to why this was a difficult and complex case.)* | |
| Please provide contact details for **AT LEAST** one referee from the following categories. The individual(s) must be able to provide useful evidence relating your handling of the case: | | |
| Party Counsel | Full name | [TYPE YOUR INPUT HERE] |
| Email address | [TYPE YOUR INPUT HERE] |
| Telephone number | [TYPE YOUR INPUT HERE] |
| Postal address | [TYPE YOUR INPUT HERE] |
| Party (if appropriate) | Full name | [TYPE YOUR INPUT HERE] |
| Email address | [TYPE YOUR INPUT HERE] |
| Telephone number | [TYPE YOUR INPUT HERE] |
| Postal address | [TYPE YOUR INPUT HERE] |
| Co-arbitrator (if relevant) | Full name | [TYPE YOUR INPUT HERE] |
| Email address | [TYPE YOUR INPUT HERE] |
| Telephone number | [TYPE YOUR INPUT HERE] |
| Postal address | [TYPE YOUR INPUT HERE] |
| Institutional representative  (Or another role, please specify) | Full name | [TYPE YOUR INPUT HERE] |
| Email address | [TYPE YOUR INPUT HERE] |
| Telephone number | [TYPE YOUR INPUT HERE] |
| Postal address | [TYPE YOUR INPUT HERE] |
| Any information about your relationship with any of the referees above that the Chartered Selection Group (CSG) should know about. | | |
| [TYPE YOUR INPUT HERE] | | |
| Please provide a brief description of the case that is sufficient to remind a potential referee of their interaction with you but does not reveal information that would breach the privacy and confidentiality of the dispute process. (Maximum 250 words) | | |
| [TYPE YOUR INPUT HERE] | | |

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| **Applicant Referees Nomination**  You can nominate three referees – one from each category of participant relevant to your cases (parties, case counsel, co-arbitrator, and provider institution). The Chartered Secretariat will seek to secure one reference from your nominations. | | |
| Referee Nomination One | Referee category | [TYPE YOUR INPUT HERE] |
| Full name | [TYPE YOUR INPUT HERE] |
| Email address | [TYPE YOUR INPUT HERE] |
| Telephone number | [TYPE YOUR INPUT HERE] |
| Postal address | [TYPE YOUR INPUT HERE] |
| Referee Nomination Two | Referee category | [TYPE YOUR INPUT HERE] |
| Full name | [TYPE YOUR INPUT HERE] |
| Email address | [TYPE YOUR INPUT HERE] |
| Telephone number | [TYPE YOUR INPUT HERE] |
| Postal address | [TYPE YOUR INPUT HERE] |
| Referee Nomination Three | Referee category | [TYPE YOUR INPUT HERE] |
| Full name | [TYPE YOUR INPUT HERE] |
| Email address | [TYPE YOUR INPUT HERE] |
| Telephone number | [TYPE YOUR INPUT HERE] |
| Postal address | [TYPE YOUR INPUT HERE] |
| Any information about your relationship with any of the referees above that the Chartered Selection Group (CSG) should know about. | | |
| [TYPE YOUR INPUT HERE] | | |

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| **SECTION TWO:**  NARRATIVE DESCRIPTION OF THE APPLICANT’S PROFESSIONAL WORK EXPERIENCE IN THE LAST TEN (10) YEARS. MAXIMUM 1,000 WORDS. |
| [TYPE YOUR INPUT HERE] |

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| **SECTION THREE:**  SELF-ASSESSMENT AGAINST CHARTERED ARBITRATOR EXCELLENCE FRAMEWORK.  Please give evidence on each competence. Please use specific examples of how you handled a relevant situation in a case rather than assertions. You may find it helpful to use the STAR approach (**S**ituation or the **T**asks you had to undertake, the **A**ction you took and the **R**esult) to formulate your examples. The CSG does not need lengthy descriptions of cases and context, but rather enough case-specific information and detail on how you approached an issue to understand your demonstration of each competence. Refer to the Chartered Arbitrator Excellence Framework for examples and indicators of excellence in practice. |
| **Competence A: Process and procedure**  **Plans, manages, and concludes the arbitration procedure, strategically, in accordance with applicable rules and principles, to maximise the opportunity for a legally sound and uncontested award.** |
| [TYPE YOUR INPUT HERE] |
| **Competence B: People and communication**  **Enables and enforces an environment of safe, fair, inclusive, and procedurally appropriate interaction.** |
| [TYPE YOUR INPUT HERE] |
| **Competence C: Outcome**  **Develops a view on the case and structures and evidences awards that are congruent with relevant rules, principles, and ethical standards.** |
| [TYPE YOUR INPUT HERE] |
| **Competence D: Equality, diversity and inclusion**  **Demonstrates cultural sensitivity and understanding of equality, diversity and inclusion (EDI) issues; and takes steps to promote diversity, equality and inclusion through arbitration proceedings and/or within the dispute resolution sector more broadly.** |
| [TYPE YOUR INPUT HERE] |
| **Competence E: Conduct and practice standards**  **Complies with ethical and practice standards and engages in reflective practice.** |
| [TYPE YOUR INPUT HERE] |

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| **SECTION FOUR**:  RECORD OF CONTINUING PROFESSIONAL DEVELOPMENT (CPD) ACTIVITIES IN THE LAST THREE (3) YEARS. |

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| **No** | **Event / Training / Conference Description** | **Date (DD/MM/YYYY)** | **Hours Recorded** | **Organiser** |
| 01 | [TYPE YOUR INPUT HERE] | [TYPE YOUR INPUT HERE] | [TYPE YOUR INPUT HERE] | [TYPE YOUR INPUT HERE] |
| 02 | [TYPE YOUR INPUT HERE] | [TYPE YOUR INPUT HERE] | [TYPE YOUR INPUT HERE] | [TYPE YOUR INPUT HERE] |
| 03 | [TYPE YOUR INPUT HERE] | [TYPE YOUR INPUT HERE] | [TYPE YOUR INPUT HERE] | [TYPE YOUR INPUT HERE] |
| 04 | [TYPE YOUR INPUT HERE] | [TYPE YOUR INPUT HERE] | [TYPE YOUR INPUT HERE] | [TYPE YOUR INPUT HERE] |
| 05 | [TYPE YOUR INPUT HERE] | [TYPE YOUR INPUT HERE] | [TYPE YOUR INPUT HERE] | [TYPE YOUR INPUT HERE] |
| 06 | [TYPE YOUR INPUT HERE] | [TYPE YOUR INPUT HERE] | [TYPE YOUR INPUT HERE] | [TYPE YOUR INPUT HERE] |
| 07 | [TYPE YOUR INPUT HERE] | [TYPE YOUR INPUT HERE] | [TYPE YOUR INPUT HERE] | [TYPE YOUR INPUT HERE] |
| 08 | [TYPE YOUR INPUT HERE] | [TYPE YOUR INPUT HERE] | [TYPE YOUR INPUT HERE] | [TYPE YOUR INPUT HERE] |
| 09 | [TYPE YOUR INPUT HERE] | [TYPE YOUR INPUT HERE] | [TYPE YOUR INPUT HERE] | [TYPE YOUR INPUT HERE] |
| 10 | [TYPE YOUR INPUT HERE] | [TYPE YOUR INPUT HERE] | [TYPE YOUR INPUT HERE] | [TYPE YOUR INPUT HERE] |
| 11 | [TYPE YOUR INPUT HERE] | [TYPE YOUR INPUT HERE] | [TYPE YOUR INPUT HERE] | [TYPE YOUR INPUT HERE] |
| 12 | [TYPE YOUR INPUT HERE] | [TYPE YOUR INPUT HERE] | [TYPE YOUR INPUT HERE] | [TYPE YOUR INPUT HERE] |
| 13 | [TYPE YOUR INPUT HERE] | [TYPE YOUR INPUT HERE] | [TYPE YOUR INPUT HERE] | [TYPE YOUR INPUT HERE] |
| 14 | [TYPE YOUR INPUT HERE] | [TYPE YOUR INPUT HERE] | [TYPE YOUR INPUT HERE] | [TYPE YOUR INPUT HERE] |
| 15 | [TYPE YOUR INPUT HERE] | [TYPE YOUR INPUT HERE] | [TYPE YOUR INPUT HERE] | [TYPE YOUR INPUT HERE] |

\*You may add additional lines if necessary.

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| **SECTION FIVE: DECLARATION**  This information is held in confidence. Applications will be judged on an individual basis. Answering YES to any of these questions will not automatically exclude you from applying. | |
| Have you, since the date of your last declaration with Ciarb, been subject to any investigation(s), finding(s), sanction(s) or action(s) by a regulatory or professional body? | YES / NO]  Delete as necessary |
| Since the date of your last declaration with Ciarb, have you or a company, partnership or other entity which you are in a position of authority or control over, threatened to suspend payment of debts, been unable to pay debts as they fall due or admitted an inability to pay your debts, in any jurisdiction? | YES OR NO |
| Since the date of your last declaration with Ciarb, are there any outstanding judgments against you? | YES OR NO] |
| Have you, since the date of your last declaration with Ciarb, been cautioned, charged or convicted of any criminal offences, (other than a motoring offence that hasn’t resulted in disqualification), in any jurisdiction? You do not have to disclose a conviction if: (i) there is applicable legislation in the jurisdiction of the conviction, which allows the criminal record to be removed after a certain period of time; and (ii) that period of time has passed. | YES OR NO] |
| Is there any requirement in the Chartered Institute of Arbitrators Code of Professional and Ethical Conduct for Members with which you have not fully complied? | : YES OR NO] |
| You are an active Fellow of Ciarb and have made payment for your 2023 membership. | [TYPE YOUR INPUT HERE: YES OR NO] |

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| If you have answered **YES** to any of the above declaration statement, please provide brief details or clarification in this section. You may attach supporting documents to provide the CSG with better understanding of your matters. Include the supporting documents with your submission and label them as “Declarations Supporting Document”. For multiple documents, include numbering in the labelling. | | |
| [TYPE YOUR INPUT HERE] | | |
| If you have been subject to any investigation(s), finding(s), sanction(s) or action(s) by a regulatory or professional body, please provide the regulatory or professional body contact details for our information. | | |
| [TYPE ORGANISATION NAME HERE] | Category | [TYPE YOUR INPUT HERE] *Regulatory / Professional Body* |
| Contact person | [TYPE YOUR INPUT HERE] |
| Email address | [TYPE YOUR INPUT HERE] |
| Telephone number | [TYPE YOUR INPUT HERE] |
| Postal address | [TYPE YOUR INPUT HERE] |
| [TYPE ORGANISATION NAME HERE] | Category | [TYPE YOUR INPUT HERE] *Regulatory / Professional Body* |
| Contact person | [TYPE YOUR INPUT HERE] |
| Email address | [TYPE YOUR INPUT HERE] |
| Telephone number | [TYPE YOUR INPUT HERE] |
| Postal address | [TYPE YOUR INPUT HERE] |
| [TYPE ORGANISATION NAME HERE] | Category | [TYPE YOUR INPUT HERE] *Regulatory / Professional Body* |
| Contact person | [TYPE YOUR INPUT HERE] |
| Email address | [TYPE YOUR INPUT HERE] |
| Telephone number | [TYPE YOUR INPUT HERE] |
| Postal address | [TYPE YOUR INPUT HERE] |

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| **Application Declaration**  I hereby apply for the status of Chartered Arbitrator of the Chartered Institute of Arbitrators. I agree to comply with the [Code of Professional and Ethical Conduct](chrome-extension://efaidnbmnnnibpcajpcglclefindmkaj/https:/ciarb.org/media/4231/ciarb-code-of-professional-and-ethical-conduct-for-members.pdf), [the Royal Charter and Bye-laws](chrome-extension://efaidnbmnnnibpcajpcglclefindmkaj/https:/www.ciarb.org/media/24323/ciarb-royal-charter-and-bye-laws.pdf) (including Schedules and by any subsequent amendments and/or alterations that may be made) and by [regulations](chrome-extension://efaidnbmnnnibpcajpcglclefindmkaj/https:/www.ciarb.org/media/24859/ciarb-regulations.pdf) made or to be made for carrying them into effect.    I declare that, to the best of my knowledge, the information given on this form is correct. I understand and agree that if I make any false statements, submit false information, or fail to disclose information requested in this application that later comes to light, I may be subject to disciplinary action, and/or my application may be declined and/or any award of Chartered status may be removed at a later date.    If successful in my application, I request that you issue to me the Chartered Certificate. I agree that the certificate will remain the property of the Institute and will undertake to return it if I cease to be a member. I understand that I will be required to return my Chartered certification along with my Membership certificate on cessation of membership and may no longer use the postnominal designatory letters, as only members who have paid their annual subscription are entitled to the Ordinary privileges of members.    I have read and agree with all the above declarations. |
| [TYPE YOUR FULL NAME HERE] |
| [TYPE THE DATE HERE] [DD/MM/YYYY] |

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| **Payment Method for application fee of £1,500**  Please indicate your payment method and the date you made payment on. | |
| **Online payment via MyCiarb portal**  An email will be sent to you once the invoice is ready for payment. | [TYPE YOUR INPUT HERE: YES OR NO] |
| **Bank Transfer**  Ciarb Bank Details  HSBC Bank, 31 Holborn, London, ECIN 2HR England  Sort Code: 40-05-03  Account Number: 31288784  International Bank Account Number (IBAN): GB75HBUK40050331288784)  Branch Identifier Code: HBUKGB4B  Please advise the Chartered Secretariat by email to [chartered@ciarb.org](mailto:chartered@ciarb.org) that you have used this method of payment. Please provide a reference comprising: ‘CArb’, your surname, and your membership number. For example, **CArbSmith23131**. | [TYPE YOUR INPUT HERE: YES OR NO] |
| **Telephone**  Please telephone our Finance Department on 020 7421 2010 and have your payment card to hand. Kindly quote your membership number and inform our Finance Department that you are applying for Chartered Arbitrator status to expedite the process. We accept MasterCard, Visa or American Express. | [TYPE YOUR INPUT HERE: YES OR NO] |