

**Arbitration Fellow (AFIDRRMI)**

**Application Form [C1-M-Arb02a]**

Please read the Important Notes on the third page before filling in this form.

Please fill in this form in BLOCK LETTERS, and put a tick in the appropriate boxes.

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| 1. Personal Particulars | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | |
| Title | | | | | ❑Mr. ❑Ms. ❑Mrs. ❑Others: | | | | | | | | | | | |  | | | | | | | | | | | | | | Recent Business Photograph | | | |
| Name in Chinese  (Must be in accordance with ID document) | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | |
| Name in English  (Must be in accordance with ID document) | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | |
| Gender | | | | |  | | | | | | | | | | Year of Birth | | | | | | |  | | | | | | | | |
| ID Document Type | | | | |  | | | | | | | | | | ID Document No.  (First 4 digits only) | | | | | | |  | | | | | | | | |
| Contact No.(Home) | | | | |  | | | | | | | | | | Contact No. (Mobile) | | | | | | |  | | | | | | | | |
| Fax No. | | | | |  | | | | | | | | | | Contact No. (Office) | | | | | | |  | | | | | | | | | | | | |
| Nationality | | | | |  | | | | | | | | | | Email Address | | | | | | |  | | | | | | | | | | | | |
| Primary region of service | | | | |  | | | | | | | | | | Travel on deployment | | | | | | | ❑Yes ❑No | | | | | | | | | | | | |
| Correspondence Address | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 2. Occupation | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | |
| Job Status | | ❑Employed ❑Retired ❑Unemployed ❑Family caregiver ❑Others (Please specify)： | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | |
| Working Experience (In reverse chronological order) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| From (MM/YYYY) | | | To  (MM/YYYY) | | | | | | Name of Company / Organization | | | | | | | | | | Job Function | | | | | | | | | Position | | | | | | |
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| 3. Academic and Professional Qualifications (In reverse chronological order) | | | | | | | | | | | | | | | | | | | | | | \*Please attach a copy of the certificate(s) | | | | | | | | | | | | |
| From (MM/YYYY) | | | | To  (MM/YYYY) | | | | | | Issuing Authority | | | | | | | | | | Academic /Professional Qualification | | | | | | | | | | | | | | |
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| 4. Category of service or specializations (Please refer to the items below and list out at most 5 items) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Reference | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| |  |  |  | | --- | --- | --- | |   Accounting |   Financial |   Personal – Injuries | |   Banking |   Human Resources |   Professional Negligence | |   Building management |   Insurance |   Securities | |   Commercial |   Intellectual Property |   Social Work Affairs | |   Company Formation |   Landlord and Tenant |   Shipping | |   Construction |   Legal – Civil Law |   Sports | |   Computing / IT |   Legal – Common Law |   Tax | |   Engineering |   Management |   Trust | |   Environmental |   Medical Negligence |   International Trade | |   Family and Children |   Partnership |   International Investment | |   Company equity |   Inheritance |   Others | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 5. Membership of Other Arbitration Organization(s) (if applicable) | | | | | | | | | | | | | | | | | | | | | | | \* Please attach a copy of the certificate(s) | | | | | | | | | | | |
| From (MM/YYYY) | | | | To  (MM/YYYY) | | | | | | Name of Arbitration Organization | | | | | | | | | | | | | | | | Membership Type | | | | | | | | |
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| 6. Language Proficiency | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | |
| Please tick “🗸” the appropriate boxes and specify any other language(s) you may be proficient in. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | | | | | | | Spoken Language Proficiency | | | | | | | | | | | | | | Written Language Proficiency | | | | | | | | | | | |  | |
|  | | | | | | | Native | | | | | | Fluent | Fair | | | | Unfamiliar | | | Native | | | | Fluent | | Fair | | | Unfamiliar | | |  | |
|  | Chinese (Putonghua) | | | | | | ❑ | | | | | | ❑ | ❑ | | | | ❑ | | | ❑ | | | | ❑ | | ❑ | | | ❑ | | |  | |
|  | Chinese (Cantonese) | | | | | | ❑ | | | | | | ❑ | ❑ | | | | ❑ | | |  | |
|  | English | | | | | | ❑ | | | | | | ❑ | ❑ | | | | ❑ | | | ❑ | | | | ❑ | | ❑ | | | ❑ | | |  | |
|  | Other: | | | | | | ❑ | | | | | | ❑ | ❑ | | | | -- | | | ❑ | | | | ❑ | | ❑ | | | -- | | |  | |
|  | Other: | | | | | | ❑ | | | | | | ❑ | ❑ | | | | -- | | | ❑ | | | | ❑ | | ❑ | | | -- | | |  | |
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| 7. Fees and Method of Payment | | | | | | |
| Welcome for joining the IDRRMI’s Arbitration Fellow panel. The Registration Fee (HK$500) is waived [if it was submitted while being on the Arbitration Member panel]. You are required to submit an Annual Fee of HK$2,000. (Membership valid from 1 January 2020 until 31 December 2020). The Annual Fee for membership renewal might be adjusted on an annual based. | | | | | | |
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| Method of Payment (Please tick “🗸” the appropriate box):  ❑ Cheque – For HKD accounts only (Should be made payable to *“International Dispute Resolution and Risk Management Institute Limited”*) | | | | | | |
| ❑ Paypal – If you would like to use Paypal, please send email to admin@idrrmi.org. We will send you the invoice for your further handling. | | | | | | |
| ❑ Bank Transfer – USD, RMB and HKD (Please deposit the fee into the multi-currency account of Bank of China: 012-704-2-005395-8)  Please write your name, contact number and specify “Arbitration Fellow Application” at the back of the bank slip and submit to the Secretariat of IDRRMI. | | | | | | |
| Date of Transfer |  | |  | Transaction Reference Number (If any) |  |  |
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| 8. Important Notes | |  | | | | |
| 1. The validity period of the qualification of successful applicants is from the date of approval to 31st December of that year. All successful applicants shall submit documents for the renewal of qualifications. 2. Applicants must submit (i) the completed application form, (ii) a recent business photograph, (iii) fees (Annual Fee only. Registration Fee is waived), (iv) copies of the certificates of academic/professional qualifications in Section 3 of this Application Form, to IDRRMI in person, by mail or email, in order that the application may be admissible. 3. The Board of Directors of IDRRMI has the right to accept or reject the application without any explanation. If the application is refused eventually, the Annual Fee will be refunded to the applicant, but the Registration Fee is not refundable or transferable. 4. The Board of Directors of IDRRMI has the right to update/change the relevant application eligibility, requirements and fees at any time without prior notice. 5. In case of any disputes, IDRRMI reserves the right to final decision. | | | | | | |

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| 9. Personal Information Collection Statement |
| 1. Purpose of Collection: Staff and the Board of Directors of IDRRMI may use applicant’s Personal Information for the following purposes：(i) to process applicant’s application; (ii) to promote dispute resolution related activities, such activities include but are not limited to: event invitation, services provided, training courses, research, opinion collection, fundraising, etc.; (iii) to communicate with applicant. All such data will not be disclosed to other parties. 2. Consequence of failing to provide Personal Information: It is necessary for applicant to provide the Personal Information requested by IDRRMI. In the event that any such Personal Information is not provided, IDRRMI may be unable to provide applicant with the services or carry out the activities outlined in point (a) above. 3. Access and Correction Rights: Under the provisions of the Personal Data (Privacy) Ordinance, applicants have the right to request access to and correction of their personal information. Applicants wishing to access or make corrections to their data should submit written requests to the Secretariat of IDRRMI.   ❑ If you do not wish to receive information as stated in point a(ii) of this statement, please indicate objection by ticking this box. |

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| 10. Applicant’s Declaration | | | | | |
| 1. I have noted, understood and agreed to the contents of the Important Notes and the Personal Information Collection Statement. 2. I declare that all information provided in this application form is accurate and complete, and authorize IDRRMI to check and verify the information supplied pertaining to my application. 3. I declare that I have no criminal record or outstanding criminal charges and there has been no disciplinary action against me by any professional body. I undertake to duly inform IDRRMI if I am charged with any criminal offences or if there is any disciplinary action against me during the time that I am admitted to IDRRMI as an Arbitration Fellow. 4. On admittance, I agree to abide by the IDRRMI Arbitrator code, and all regulations of IDRRMI, such regulations include but are not limited to: Arbitrator’s Rules, Code of Ethics, Disciplinary Procedures, etc., and all regulations and by-laws and any amendments thereto of the Board of Directors of IDRRMI. 5. I understand that my failure to provide accurate and sufficient information in this application will disqualify my application and may hinder arbitration case referral (if any) from IDRRMI or lead to revocation of my qualification as an Arbitration Fellow. 6. I understand that the Board of Directors of IDRRMI has the final decision on my application. If my application is refused eventually, I cannot object, while the Registration Fee is not refundable or transferable. | | | | | |
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| Signature |  |  | Date |  |  |
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| Checklist for Applicant | |
| Please check if all required information and documents are provided： | |
| ❑ | Completed Application Form |
|  |  |
| ❑ | Recent business photograph (144x192 Pixel (3.8cm x 5cm)) |
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| ❑ | Fees (Registration Fee is waived if application was submitted while being on the Arbitration Member panel) |
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| ❑ | Copies of the certificates of academic/professional qualifications in Section 3 of this Application Form |
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| ❑ | Copies of certified documents of accreditation by a renowned arbitration accreditation institution |

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| For office use only | | | |
| Date of Application |  | Arbitration Fellow Number |  |
| Date of Approval |  | Receipt Number |  |
| Approval Results |  | Remarks |  |
|  | | | |
| Address: 21/F, Success Commercial Building, 245-251 Hennessy Road, Wanchai, Hong Kong  Tel: (852) 2866 1800 Fax: (852) 2866 1299 Website: <https://idrrmi.org> Email: [admin@idrrmi.org](mailto:admin@idrrmi.org) | | | |