
Academic and Professional Qualifications:

Institution:

Qualification:

Date Obtained:

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Fields of Special Competence:

Membership to professional Association(s)

Name of the Association(s)

ARBITRATION EXPERIENCE*

	Chairman of the tribunal	Sole Arbitrator	Co-arbitrator	Party's counsel	<u>Others</u>
International Institutional arbitration					
International Ad Hoc Arbitration					
Institutional Domestic Arbitration					
Ad Hoc Domestic Arbitration					

* Indicate the number of cases you were involved in (Ex: 1, 2, 3, 4 etc.....)

Number of Awards issued:

Approx date: _____

Approx date _____

Approx date _____

Approx date: _____

Approx date _____

Experience as Expert witness: _____

KIAC MODEL CLAUSES FOR CONTRACTS

Any dispute arising out of or in connection with this contract, including any question regarding its validity or termination shall be referred to and finally resolved by arbitration under the Rules of Kigali International Arbitration Centre (KIAC).

Experience as Mediator/Conciliator:

Languages (E = Excellent G = Good F = Fair):

Language:	Writing:	Speaking:	Reading:	Technical terminology:
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Additional Information(if any):

KIAC MODEL CLAUSES FOR CONTRACTS

Any dispute arising out of or in connection with this contract, including any question regarding its validity or termination shall be referred to and finally resolved by arbitration under the Rules of Kigali International Arbitration Centre (KIAC).

Declaration

1. I understand that my data will become a part of KIAC's files and may be used for all purposes deemed necessary or useful by KIAC.
2. I declare that the information given in support of this application is accurate and complete.
3. I confirm that I am familiar with and will adhere to KIAC Code of Ethical Conduct for Arbitrators.
4. Any information on this form may be made available by KIAC to third parties for the purposes of appointment and selection of arbitrator.

Signature : _____ **Date :** _____

Name : _____

REPLY SLIP: APPLICATION TO THE PANEL OF DOMESTIC ARBITRATORS

(Please return to KIAC once completed)

I _____ hereby authorize / do not authorize* KIAC to disclose details of my CV to those who enquire into my services as arbitrator. I also authorize / do not authorize* KIAC to include details of my CV on KIAC's website for general viewing by the public.

* *delete as appropriate*

I enclose the following completed documentation for KIAC records:-

- 1) Application form;
- 2) CV

Signed _____ Date _____