

UNITED STATES DISTRICT COURT
DISTRICT OF SOUTH CAROLINA

Application for Mediators

Please complete the entire application, using additional paper if necessary. You may also attach a resume.

Name: William M. Catoe

Firm or Office Name: United States District Court

Office Address: Post Office Box 10262, Greenville, SC 29603

Office Phone: 864-241-2740 Office Fax: 864-241-2743

email address: william_catoe@scd.uscourts.gov

ADMISSIONS AND AFFILIATIONS

Date admitted to the Bar of the District of South Carolina: 1969 I.D. No.: 75

Date admitted to the South Carolina Bar: 1969 Bar No.: 1165

Other courts or jurisdictions to which admitted (with dates of admission and bar nos.): _____

Memberships and positions held in bar, ADR and professional associations: _____

Are you a member in good standing in each jurisdiction where admitted to practice law? yes no

Are you currently the subject of any pending disciplinary proceeding in any jurisdiction? yes no

Have you, within the last 5 years, been denied admission to a bar for character or ethical reasons or disciplined for professional misconduct? yes no

EDUCATION

Year law degree received Law School University of South Carolina

Other professional degrees received (including year and school) _____

LEGAL EXPERIENCE (A minimum of 5 years of law practice required)

Summarize legal experience (including teaching) since admission to the bar, particularly in the past five years:

United States Magistrate Judge for the District of South Carolina since 1978.

Percentage of practice in last 5 years representing plaintiff N/A% or defense N/A%

Percentage of Federal or State court practice in last 5 years: Federal 100% State %

Number of years engaged in active litigation: 5

EXPERTISE

Indicate all substantive areas in which you have expertise. Place a "1" by your strongest area(s) and a "2" by all other areas in which you have expertise. (Do not rank beyond "1" and "2.") After any category you have marked, please identify any sub-areas of expertise you have (e.g. "medical malpractice" after Personal Injury).

<u> </u> Admiralty	<u> 1 </u> Security or Shareholders suits
<u> 1 </u> Antitrust	<u> 1 </u> Labor
<u> 1 </u> Contracts	<u> 1 </u> ERISA
<u> 1 </u> Environment	<u> 1 </u> Wrongful Termination
<u> 1 </u> Fraud or Civil RICO	<u> </u> Civil Rights in Employment
<u> </u> Insurance	<u> </u> Other Civil Rights
<u> </u> Miller Act	<u> </u> Copyrights
<u> </u> Personal Injury	<u> 1 </u> Patent
<u> 1 </u> Product Liability	<u> 1 </u> Trademark
<u> X </u> Other (specify) <u>All matters pending before U.S. District Court</u>	

Publications: _____

MEDIATION EXPERIENCE

Mediation experience (particularly in the subject matter categories above): _____

United States Magistrate Judge since 1978.

Other courts or organizations for whom you serve as a mediator (please note any certifications):

Number of mediations conducted: _____ Number of other ADR sessions conducted: _____

MEDIATION AND OTHER ADR TRAINING

<u>Course Provider</u>	<u>Course Content</u>	<u>Date</u>	<u>Place</u>	<u>No. of Hours</u>
<u>DMI</u>	<u>Civil Mediator Training</u>	<u>Oct. 2002</u>	<u>Orlando, FL</u>	<u>40</u>
<u>Federal Judicial Center</u>	<u>Mediation Skills Seminar</u>	<u>June 2001</u>	<u>Albuquerque, NM</u>	<u>15</u>

OTHER INFORMATION

Are you familiar with the statutes, rules and practice governing alternative dispute resolution in the District of South Carolina? yes no

Other relevant experience or skills or other information you would like considered in connection with this application:

Cities in which you are available to conduct mediation:

Columbia

Charleston

Greenville

Florence

Other _____

Fees charged: Available by Court Appointment Only

Hourly Rate: \$ _____ Minimum charge each mediation: \$ _____

How do you bill for travel? (explain): _____

I agree to: (1) Be subject to the Rules of Professional Conduct, Rule 407, South Carolina Appellate Court Rules; the Rules for Lawyer Disciplinary Enforcement, Rule 413, South Carolina Appellate Court Rules; and the Local Rules of the District Court; (2) Provide mediation to indigents without pay if ordered by the Court; (3) Notify the Alternative Dispute Resolution Program Director of any change in the above facts or otherwise in my ability to perform duties as a mediator; (4) Disclosure of information contained in this application to litigants and other members of the public.

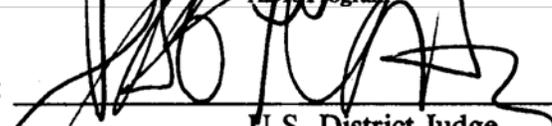
I certify that the foregoing is true and correct.

Signature:  Date: 11/1, 2002
Applicant

Return completed application to:
Danny H. Mullis, Director
Alternative Dispute Resolution Program
United States District Court
Post Office Box 835
Charleston, SC 29402-0835

Reviewed: 
ADR Program

Date: 11/7/02

Approved: 
U.S. District Judge

Date: 11/12/02