

SANTA CLARA COUNTY SUPERIOR COURT
BACKGROUND INFORMATION / CIVIL DIVISION ADR PANEL

Instructions: DO NOT ALTER THIS FORM IN ANY WAY. DO NOT ATTACH ADDITIONAL PAGES.

Name	Phone	Fax
<i>Nicole Gesher</i>	<i>415-294-0215</i>	<i>415-963-3476</i>
Street or P.O. Box	City	Zip Code
<i>407 Chester Street</i>	<i>Menlo Park, CA</i>	<i>94025</i>
TODAY'S DATE:	<i>Nicole@gesher.net</i>	
Check each panel for which you have been accepted:	<input checked="" type="checkbox"/> mediation	<input type="checkbox"/> neutral evaluation

1. Describe your education, including degrees and the dates received.
BA, University of Michigan, Ann Arbor, High Honors in History, 2003
JD, UC Hastings College of the Law, 2007

2. Briefly describe the ADR training you have received. For each training, give the trainer's name, the dates attended, and the total hours.

-UC Hastings Mediation Clinic, Miye Goishi & Darshen Brach, Jan-May '07, 100 hours
-Community Boards, Basics of Mediation, Liora Kahn & Tracy Lemon, 9/08, 40 hours
-Nor. Cal Mediation Center, Family Law Mediation, Nancy Foster & Sarah Killingsworth, 5/10, 13 hours

3. Describe the subject matter of five disputes for which you have been an ADR provider in the past five years, with the dates. Identify the process and state whether you were a sole- or co-provider.

- *Business partnership dissolution, 2/10, sole provider*
- *Consumer complaint / airline, 3/07, co-provider*
- *Planning commission, 12/10, co-provider*
- *Premarital agreement, 1/11, sole provider*
- *Financial settlement, 3/11, sole provider*

4. Check your areas of substantive expertise:

- | | | |
|-------------------------------------------------------|-----------------------------------------------------------|----------------------------------------------------------|
| <input type="checkbox"/> Banking | <input type="checkbox"/> Health Care | <input checked="" type="checkbox"/> Partnership Disputes |
| <input checked="" type="checkbox"/> Business/Contract | <input type="checkbox"/> Housing | <input type="checkbox"/> Personal Injury |
| <input checked="" type="checkbox"/> Civil Rights | <input checked="" type="checkbox"/> Intellectual Property | <input checked="" type="checkbox"/> Probate - Wills |
| <input type="checkbox"/> Construction | <input type="checkbox"/> Insurance | <input type="checkbox"/> Professional Negligence |
| <input type="checkbox"/> Defamation | <input checked="" type="checkbox"/> Labor - Employment | <input type="checkbox"/> Real Estate |
| <input type="checkbox"/> Disabilities | <input checked="" type="checkbox"/> Landlord/Tenant | <input type="checkbox"/> Securities |
| <input type="checkbox"/> Elder Issues/Abuse | <input type="checkbox"/> Medical Malpractice | <input type="checkbox"/> Tax |
| <input type="checkbox"/> Environment | <input type="checkbox"/> Neighborhood | <input type="checkbox"/> Other (specify) _____ |

5. If you are an attorney:

A. How many years have you been in active practice? If none, please explain.

3.5 years

B. What is or was the nature of your practice?

Previously litigation, now mediation

C. What percentage of your practice has been representing plaintiffs *00%* defendants *100%*

D. How many of the following have you completed in the past five years?:

Jury trials *0* Court trials *0* Judicial arbitrations; *0*

6. Is your ADR style facilitative or evaluative/directive?

Facilitative.

7. Describe your fee schedule, including any sliding-scale or pro-bono provisions.

\$300.00/hour, sliding scale and pro bono available.

8. Give any other information that should be considered by parties or counsel.

Available to meet at a location convenient to all parties, will travel at no additional cost.