

**SANTA CLARA COUNTY SUPERIOR COURT  
JUDICIAL ARBITRATOR BACKGROUND INFORMATION**

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

<b>Name</b> <i>Stevan C. Adelman, Esq.</i>	<b>Phone</b> <i>408-292-1765</i>	<b>Fax</b> <i>408-436-8272</i>
<b>Street or P.O. Box</b> <i>25 Metro Drive 7<sup>th</sup> Floor</i>	<b>City</b> <i>San Jose, CA</i>	<b>Zip Code</b> <i>95110</i>
<b>State Bar Number:</b> <i>56413</i>	<b>Email address:</b> <i>SCA@millermorton.com</i>	

**1. Describe your education, including degrees and the dates received.**

*-BA, Columbia University 1970*

*-JD, Boalt Hall, UC Berkeley 1973*

**2. How many years have you been in active civil litigation practice as a member of the California State Bar?**

*31 years*

**3. What is or was the nature of your practice?**

*Primarily real estate litigation*

**4. What percentage of your practice has been representing plaintiffs    *40%*    defendants    *60%***

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

**Jury trials**    *0*            **Court trials**    *5*            **Judicial arbitrations**    *10*

**6. Describe the subject matter of five disputes for which you have been an ADR provider in the past five years, with the dates.**

- *Real estate nondisclosure*
- *Accounting*
- *Partnership dissolution*
- *Real estate – landlord/tenant*
- *Real estate nondisclosure*

**7. Check your areas of substantive expertise:**

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Banking                                     | <input type="checkbox"/> Health Care           | <input type="checkbox"/> Personal Injury           |
| <input checked="" type="checkbox"/> Business (Commercial - Contract) | <input type="checkbox"/> Housing               | <input type="checkbox"/> Probate - Wills           |
| <input type="checkbox"/> Civil Rights                                | <input type="checkbox"/> Intellectual Property | <input type="checkbox"/> Prof. Negl. (Non-Medical) |
| <input checked="" type="checkbox"/> Construction                     | <input type="checkbox"/> Insurance             | <input checked="" type="checkbox"/> Real Estate    |
| <input type="checkbox"/> Defamation                                  | <input type="checkbox"/> Labor - Employment    | <input type="checkbox"/> Securities                |
| <input type="checkbox"/> Disabilities                                | <input type="checkbox"/> Landlord/Tenant       | <input type="checkbox"/> Tax                       |
| <input type="checkbox"/> Elder Issues/Abuse                          | <input type="checkbox"/> Medical Malpractice   | <input type="checkbox"/> <i>Other (specify):</i>   |
| <input type="checkbox"/> Environment                                 | <input type="checkbox"/> Neighborhood          |  |
| <input type="checkbox"/> Family Law                                  | <input type="checkbox"/> Partnership           |  |

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