

DOMESTIC RELATIONS MEDIATOR APPLICATION

To be eligible to serve as a domestic relations mediator, you must meet the training and experience criteria specified either in MCR 3.216(G) or in the SCAO Mediation Training Standards and Procedures pursuant to MCR 3.216(G)(2).

Service as a case evaluator under MCR 2.403 does not constitute a qualification for serving as a mediator. Refer to the Mediation Training Standards and Procedures for further information about minimum qualifications.

Note: Except for Part B, the information provided in this application is available to the public for inspection.

Please type or print neatly.

1. Full name (first, middle initial, last)		2. Bar no. if applicable P
3. Address where you can be contacted		
4. Telephone no. ()	5. Fax no. ()	6. E-mail address

Part A: Domestic Relations Mediator Qualifications Complete items 7 and 8, and either item 9, 10, or 11 as appropriate)

7. Is this a new application? renewal? If renewing, complete item 11 and attach a copy of your original application.

8. Completed a 4-hour domestic violence program approved by the SCAO on _____ .
Date

9. Qualification through State Court Administrative Office (SCAO) Approved Training / Association for Conflict Resolution (ACR) Training

a. SCAO/ACR Approved training completed on _____ . (attach copy of certificate)
Date

Trainer: _____

If the ACR training was completed more than 2 years prior to the application, completed 8 hours of advanced mediation training in the 2 years prior to this application. Specify type of training, dates, and trainers, and attach copy of certificate.

b. Licensed in appropriate field. Specify _____

Master or graduate degree in appropriate field. Attach copy of diploma.

5 years experience in family counseling. Detail below. Complete on separate page if needed.

c. Observed 2 domestic relations mediation proceedings. Specify dates and mediator names and attach verification. Do not include party names.

d. Conducted 1 domestic relations mediation to conclusion. Specify date and name of mediator serving as supervisor and attach verification. Do not provide party names.

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Part A: Domestic Relations Mediator Qualifications (continued)

9. e. Requesting waiver of degree requirements: Completed 80 hours or 20 cases in domestic relations mediation. Detail below. Complete on separate page if needed. Do not provide party names.

- f. As a non-Michigan licensed lawyer/non-lawyer, completed on _____, Date

a 6-hour program addressing basic Michigan laws, rules, and guidelines governing domestic relations actions.

Instructor: _____

10. Qualification by Training and Experience Comparable to ACR Approved Training

- a. Completed a training course of at least 24 hours including participation in mediation and at least 25% role play by December 31, 2000. Attached are: 1) a certificate of completed training; 2) a copy of the training agenda; 3) the name of the trainer; 4) the date of the training; and 5) the dates of attendance.

Training included the following core elements: Check appropriate boxes

- | | |
|--|---|
| <input type="checkbox"/> experience of divorce for adults and children | <input type="checkbox"/> family law and family economics |
| <input type="checkbox"/> information gathering skills and knowledge | <input type="checkbox"/> relationship skills and knowledge |
| <input type="checkbox"/> communication skills and knowledge | <input type="checkbox"/> problem-solving skills and knowledge |
| <input type="checkbox"/> professional skills and knowledge | |
| <input type="checkbox"/> mediation, negotiation, and conflict management theory and skills | |
| <input type="checkbox"/> ethical decision-making and values skills and knowledge | |

- If the training was completed more than 2 years prior to this application, completed at least 8 hours of advanced mediation training in the 2 years prior to this application. Specify type of training, dates, and trainers, and attach copy of certificate.

- b. Licensed in appropriate field. Specify
- Master or graduate degree in appropriate field. Attach copy of diploma.
- 5 years experience in family counseling. Detail below. Complete on separate page if needed.

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Full name (first, middle initial, last) (print or type)	Bar no. (if applicable) P
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Part B: Gender and Race Information

Providing the following information is optional. It is requested in accordance with MCR 3.216(F)(1)(c) will be maintained separately from your application.

Check the boxes that apply to you.

Gender:

- Female Male

Race/Ethnicity:

- American Indian or Alaskan Native
 Asian or Pacific Islander
 Black/African American (non-Hispanic)
 Hispanic
 White/Caucasian (non-Hispanic)
 Other (specify): _____

Part C: Pro Bono and Observee/Observer Information

Providing the following information is optional and will be maintained separately from your application.

1. Once you have been qualified by the court to serve as a mediator:
 - a. Are you willing to be observed by a prospective mediator? Yes No
 - b. Are you willing to observe a prospective mediator in mediation pro bono? Yes No
2. Are you willing to accept appointment from the court to serve as a pro bono mediator once a year? Yes No