

Application for National Mediator Accreditation

Under the National Mediator Accreditation System

INTRODUCTION

The National Mediator Accreditation System (the “NMA”) promotes quality, consistency and accountability of mediators accredited under that system in Australia. This application should be read in conjunction with the *Approval Standards* and the *Practice Standards* under the NMA as revised and in force from 1 July 2015.

The *Approval Standards* (Part II of the NMA) apply to any person seeking accreditation and also to mediators who are already accredited under the NMA. The *Approval Standards* specify the training, assessment, personal qualities and experience required of NMA accredited mediators and for their renewal of accreditation.

The *Practice Standards* (part III of the NMA) apply to NMA accredited mediators. The *Practice Standards*: (i) specify the minimum practice and competency requirements of a NMA accredited mediator; (ii) inform participants and others about what they can expect of the mediation process and of a NMA accredited mediator and (iii) should be read in conjunction with the *Approval Standards* referred to above.

Mediators, in order to maintain approval, must continue to comply with the *Practice Standards* and seek renewal of approval in accordance with section 3 of the *Approval Standards* every two years. Mediators seeking accreditation must provide evidence to the RMAB that they have, within the two-year cycle, conducted a minimum of 25 hours of mediation, co-mediation or conciliation, and a minimum of 25 hours of continuing professional development. For further information on the requirements for renewal of accreditation, please refer to section 3 of the *Approval Standards*.

The Institute of Specialist Dispute Resolution (ISDR) is a Recognised Mediator Accreditation Body (RMAB) under the NMA.

SECTION 1: PERSONAL DETAILS

| | |
|-------------------------------------|-----------|
| FIRST NAME: | SURNAME: |
| POSTAL ADDRESS: | |
| STATE/TERRITORY: | POSTCODE: |
| TEL: | MOB: |
| EMAIL: | |
| OCCUPATION/EMPLOYER: | |
| NAME TO BE DISPLAYED ON CERTIFICATE | |

SECTION 2: REFERENCES

Applicants need to provide evidence of “good character” in the form of references from two members of their community who have known them for more than three years. These references should provide evidence that you are regarded as honest and fair and that you are regarded as suited to practice mediation by reference to your life, social and work experience.

| | | | |
|-----------------------------------|-----|-----|-----|
| Name of Referee #1 | | | |
| Address | | | |
| | | | |
| Telephone | (w) | (m) | (f) |
| Email | | | |
| Occupation | | | |
| Relationship to Applicant: | | | |

| | | | |
|-----------------------------------|-----|-----|-----|
| Name of Referee #2 | | | |
| Address | | | |
| | | | |
| Telephone/Fax | (w) | (m) | (f) |
| Email | | | |
| Occupation | | | |
| Relationship to Applicant: | | | |

Please attach 2 references

SECTION 3: DECLARATIONS

- a) I declare that I meet the requirements of a police check in my state/territory and that I am without any serious conviction or impairment that could influence my capacity to discharge my obligations in a competent, honest and appropriate manner.
- b) I have not been “disqualified” from, or had any conditions imposed upon, any type of professional practice (for example, by a Law Society or Medical Association). If you cannot make this declaration, please explain the circumstances under which you have been disqualified or had conditions imposed upon your practice.
- c) To the best of my knowledge I comply with, and I will continue to comply with, the NMAS *Approval Standards* and *Practice Standards*, with any relevant legislation, professional standards and any other requirements that may be relevant.
- d) I have not ever been refused NMAS accreditation or accreditation renewal or had my accreditation suspended or cancelled.
- e) I acknowledge that ISDR, as a RMAB, is obliged to provide information concerning the status of my accreditation (including lapse, suspension, cancellation or reinstatement) to the Mediator Standards Board and may disclose information in order to ensure the National Register of Nationally Accredited Mediators is current.

Signed:**Date:**

SECTION 4: EVIDENCE OF TRAINING & EDUCATION

Please complete this section if you have undertaken mediation training after 2008 and you are NOT applying to be accredited under any of the alternative training and assessment pathways set forth in Section 2.5 of the *Approval Standards*.

If your accreditation application is based on any of the alternative threshold training and education requirements set forth in Section 2.5 of the Approval Standards, please proceed to Section 5.

Please tick as appropriate.

| | |
|--|--|
| I have completed a training course that consisted of 38+ hours (which may be constituted by more than one mediation workshop provided not more than 24 months has passes between workshops) | |
| This training course was lead by a minimum of two instructors in which the principal trainer has more than three years' experience both as a NMAS accredited mediator and as an instructor; | |
| This training course had sufficient coaches for each trainee to be observed performing as mediator by different coaches in two simulated mediations, each of at least 1.5 hours in duration, and written, debriefing coaching feedback in respect of these two simulated mediations was provided to the participant by different members of the training team. | |
| This training course involved each course participant in at least nine simulated mediation sessions and in at least three simulations each course participant performs the role of mediator. | |
| I have been assessed in the role of mediator in a simulated mediation assessment (role-play) of no less than 1.5 hours. | |
| I have received written feedback from the role play assessment referred to above outlining my capabilities across the core competencies from an assessor who was not one of the lead trainers and who is accredited under the NMAS <i>Approval Standards</i> . | |
| Training Provider: | |
| Lead Trainer: | |
| Course Dates: | |

| | |
|-------------------------|--|
| Assessment Date: | |
| Please Attach: | Training Course Programme Course Certificate Assessment Form |

SECTION 5: ALTERNATIVE PATHWAYS TO MEETING THE TRAINING AND ASSESSMENT REQUIREMENTS

This section applies to mediators requesting accreditation in accordance with Section 2.5 of the *Approval Standards*. Under Section 2.5, an applicant may alternatively meet the requirements for training and assessment by providing evidence to an RMAB regarding one of the pathways set forth below. Please indicate by a tick below which pathway you are seeking to satisfy the alternative pathway to accreditation.

Section 2.5(a) - Comparable training and assessment

(a) having completed a mediator training course which is at least comparable to the training course described in Section 2.3 of *the Approval Standards*; and

(b) having been found competent in the assessment as described in Section 2.4 of the *Approval Standards*,

OR

Section 2.5(b) - Experience, education and assessment

(a) providing evidence to an RMAB of having conducted at least 100 hours of mediation, and otherwise met the continuing accreditation requirements described in Section 3 of the *Approval Standards* within the two years prior to the application; and

(b) providing two references attesting to the mediator's competence; and

(c) having completed mediator training, supervision or education to the satisfaction of the RMAB; and

(d) having been found competent in the assessment as described in Section 2.4 of the *Approval Standards*

OR

Section 2.5(c) - CALD knowledge, experience and assessment

(a) providing evidence to an RMAB that the applicant possesses appropriate mediation experience and knowledge of the unique values and traditions within the culturally and linguistically diverse (CALD) community with which the mediator identifies; and

(b) providing two references attesting to the mediator's competence; and

(c) having been found competent in the assessment as described in Section 2.4 of the *Approval Standards*.

SECTION 6:

Evidence of membership of a RMAB, or membership or employee of an or relationship organisation that has a relevant ethical code or standard and a complaints and disciplinary procedure that can address complaints against mediators (such as The Institute of Specialist Dispute Resolution or a law society or bar association.)

Name of Association or Organisation/s:

SECTION 7: RELEVANT PROFESSIONAL INSURANCE

Section 2(j) of the *Approval Standards* provides that an applicant must be covered by relevant professional indemnity insurance, or have statutory immunity.

Declaration

I confirm that I have the required professional indemnity and public liability insurance and I attach relevant evidence of this.

Signed:

Date:

SECTION 8:

ATTACHMENTS

| | |
|-------------------|--|
| Section 2: | <ul style="list-style-type: none"> • 2 x references that include provide evidence that the applicant is of good character and that they are regarded as suited to practice mediation by reference to their life, social and work experience. |
| Section 4: | <ul style="list-style-type: none"> • Course Certificate • Assessment Form • Training Course Programme |
| Section 5: | <ul style="list-style-type: none"> • A written submission explaining how you have met the requirements set out in section 2.5(a), 2.5(b) or 2.5(c), as the case may be. |
| Section 6: | <ul style="list-style-type: none"> • Evidence of membership of or relationship with a professional association or organisation that has appropriate relevant and ethical requirements, complaints and disciplinary processes as well as ongoing support such as The Institute of Specialist Dispute Resolution or a law society or bar association. |
| Section 7: | <ul style="list-style-type: none"> • Evidence of Relevant Insurance, Statutory or Indemnity or Employee Status. |

PAYMENT OF ACCREDITATION FEE

Payment (or confirmation of EFT) of \$XXX accreditation fee is required with this application, by cheque or EFT. Of this fee, \$90 will be remitted to the Mediator Standards Board. The remaining \$XX is retained by ISDR to contribute towards administration costs.

Account Name: Jon Graham Consulting

BSB: 112-879

Account Number: 041426753

PLEASE QUOTE "SURNAME NMAS" if paying by EFT.

An invoice will be provided.

PLEASE RETURN COMPLETED APPLICATION AND PAYMENT TO

The Institute of Specialist Dispute Resolution

PO Box 787,
Five Dock
NSW 2046

training@isdr.com.au