

OAKLAND COUNTY PROBATE MEDIATOR APPLICATION

For further information, including information about minimum qualifications promulgated by the State Court Administrative Office, please refer to the SCAO Mediation Training Standards and Procedures and MCR 2.411.

Service as a case evaluator under MCR 2.403 does not constitute a qualification for serving as a mediator.

Note: Except for Part D, 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: General Information Complete item 7 and either 8, 9, 10, 11 or 12 as appropriate

7. Is this a new application? renewal? If renewing, complete item 12 and attach a copy of your original application.

Part B: Probate Mediator Qualifications (Complete either item 8, item 9, item 10 or item 11 as appropriate) Where indicated you must provide the written evidence requested.

8. Qualification through State Court Administrative Office (SCAO) Approved Training
To be eligible to serve as a probate mediator, you must meet the following minimum qualifications:

- You must have completed a training program approved by the State Court Administrator.
- You must have one or more of the following: a) a juris doctor degree; b) graduate degree in conflict resolution; or c) 40 hours of mediation experience over two years, including mediation, co-mediation, observation, and role-playing in the context of mediation.
- You must have observed two general civil or probate mediation proceedings conducted by an approved mediator, and have conducted one general civil or probate mediation to conclusion under the supervision and observation of an approved mediator.

a. SCAO Approved training completed on _____ Date. Please attach a certificate of completed training.

Trainer: _____

- b. Juris Doctorate - Attach a copy of diploma if not a licensed attorney
- Graduate degree in conflict resolution - Attach copy of diploma
- 40 hours of mediation, co-mediation or role-playing experience in the two years prior to this application. Detail below. Co-mediation can be documented as either experience or observation – do not count the same case twice. Complete on separate page if needed.

Case Type	Date	Length of Time
_____	_____	_____
_____	_____	_____
_____	_____	_____

- e. If not an attorney, mediated or co-mediated at least 40 hours or 18 cases in the two years prior to this application. Detail below. Co-mediation can be documented as either experience or observation – do not count the same case twice. Complete on separate page if needed. Do not provide party names.

Case Type	Date	Length of Time

- f. As a non-lawyer or non-Michigan licensed lawyer, completed on _____ a 6-hour program addressing basic Michigan laws, rules, and guidelines governing civil actions.
Trainer: _____

11. **Other Qualification** Complete items 11a or 11b and 11c through 11e.

- a. Voluntary Facilitative Mediation Program Training – Completed a minimum 16-hour program prior to January 1, 2003. Attach copy of certificate and copy of training agenda. Specify the name of the trainer and dates of attendance.

- b. Circuit Court Mediation – Completed a minimum 16-hour mediation training program and supplemental 8-hour program related to the training components of Section 2.1 completed before December 31, 2001. Attach copy of certificate and copy of training agenda. Specify the name of the trainer and dates of attendance.

- c. If the 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.

- d. Observed or co-mediated two general civil or probate mediation proceedings. Specify dates and name of qualified * mediator who observed or co-mediated. Co-mediation can be documented as either experience or observation – do not count the same case twice. Do not include party names.

Date	Name of Qualified Mediator

- e. Conducted under supervision or co-mediated one general civil or probate mediation to conclusion. Specify date and name of qualified * mediator who observed or co-mediated. Co-mediation can be documented as either experience or observation – do not count the same case twice. Do not include party names.

Date	Name of Qualified Mediator

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- f. If not a lawyer, mediated at least 40 hours or 18 cases in the 2 years prior to this application. Detail below. Co-mediation can be documented as either experience or observation – do not count the same case twice. Complete on separate page if necessary. Do not provide party names.
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12.

Renewing Application

If the mediation 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.

CERTIFICATION

I certify that I: a) meet the requirements for service under the Court’s mediator selection plan; b) will not discriminate against parties or attorneys on the basis of race, ethnic origin, gender, or other protected personal characteristic; and c) will comply with the Court’s ADR plan, orders of the Court regarding cases submitted to mediation, and the standards of conduct adopted by the State Court Administrative Office.

My fee for services is: _____ per: _____

My practice specialty is: _____

Date

Signature

Please send this completed application to:
Oakland County Case Management – ADR Office
1200 N Telegraph Rd Dept 404
Pontiac MI 48341-0404

Part C: Pro Bono and Observee/Observer Information

Providing the following information is optional.

Full name (first, middle initial, last) (print or type)	Bar no. (if applicable) P
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1. Once you have been fully qualified to be a mediator, and have completed 40 hours of experience or 18 cases:
 - a. Are you willing to be observed by a potential mediator? Yes _____ No _____
 - b. Would you be willing to be a pro bono observer? Yes _____ No _____
 - c. Would you be willing to be an observer under terms and conditions you agree upon with the potential mediator you are observing? Yes _____ No _____

2. Would you be willing to accept a pro bono appointment from the court to serve as a mediator once a year?
Yes _____ No _____

Date

Signature

Part D: Gender and Race Information

Providing the following information is optional. It is requested in accordance with MCR 2.404(E)(1)(c) and will be maintained separately from your application.

Full name (first, middle initial, last) (print or type)	Bar no. (if applicable) P
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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): _____