



**ALABAMA CENTER FOR DISPUTE RESOLUTION**  
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[www.alabamaADR.org](http://www.alabamaADR.org)

## APPLICATION FOR REGISTRATION ON THE ALABAMA STATE COURT MEDIATOR ROSTER

### General Information

This registration form is to be completed by mediators who wish to be listed on the Alabama State Court Mediator Roster. Effective January 1, 1997, a neutral must meet certain educational and training standards to be registered. Copies of the Mediator Standards and Registration Procedures and this application form are available at the website [www.alabamaADR.org](http://www.alabamaADR.org), or they are attached if you are requesting this by mail. Registration does not imply any degree of mediation skills or competency on behalf of any mediator.

Registration will be granted for a one-year period. Applicants who become registered during any given year shall apply for renewal in January of the following year. Prior to the renewal date a renewal form will automatically be sent to each registered neutral. Annual registration fee is \$125, and there is a one-time application fee of \$30.

**The Alabama Mediator Roster shall be maintained as a public record. Names, addresses, and telephone numbers will be furnished upon request. Applicants who do not wish to have their telephone numbers disclosed to anyone requesting a list of registered mediators should not include their telephone number on the application.**

**This application will be considered pursuant to the registration criteria set out in the Mediator Standards and Registration Procedures as adopted by the Alabama Supreme Court Commission on Dispute Resolution and without regard to race, color, religion, political affiliation, national origin, handicap, sex, or age.**

FOR OFFICE USE ONLY:  
DATE REC'D  
REG DATE

BKRDCCK  
RE-REG DATE

REG NO  
CHECK(S)  
CHECK(S) AMT.

Alabama Center For Dispute Resolution  
Application for Registration  
on the Alabama State Court Mediator Roster

Application for registration on the Alabama State Court Mediation Roster is made pursuant to the mediator registration standards and procedures of the Alabama Supreme Court Commission on Dispute Resolution effective September 18, 1998, revised May 4, 2007.

Please check the type(s) of registration for which you are applying:

\_\_\_\_\_ General Mediation \_\_\_\_\_ Domestic Relations Mediation \_\_\_\_\_ Both

**PART I: REGISTRATION STANDARDS**

I am applying under the standard checked below:

**GENERAL CIVIL:**

1. I have reached the age of majority in Alabama, and I am licensed as an attorney by one of the fifty states of the United States or the District of Columbia and in good standing, with four years' legal or judicial experience; and have successfully completed a 20 hour mediation training program approved by the Center *within 2 years preceding application*. To be approved, training programs must include as part of their curricula, at a minimum, mock mediation exercises and ethics education, and *must include* one hour of Alabama mediator ethics; or, **check here** \_\_\_\_\_
2. I have reached the age of majority in Alabama, and I have either a baccalaureate degree and at least five years of management or administrative experience in a professional, business, or government entity OR a high school diploma and 8 years of management or administrative experience in a professional, business, or governmental entity; and have completed a 20 hour mediation training program approved by the Center *within 2 years preceding application*. To be approved, training programs must include as part of their curricula, at a minimum, mock mediation exercises and ethics education, and *must include* one hour of Alabama mediator ethics. In addition, I have served professionally as the mediator in at least 10 mediations within the 2 years immediately preceding submission of an application for registration, and I will present documentation of the mediations and names, addresses and telephone numbers of persons who may be contacted regarding the mediations. **check here** \_\_\_\_\_

ACDR Rev. 9/2009

**DIVORCE/DOMESTIC RELATIONS:**

1. I have reached the age of majority in Alabama and I am licensed as an attorney by one of the fifty states of the United States or the District of Columbia and in good standing, with four years' legal or judicial experience; and have successfully completed a 40 hour mediation course on domestic relations issues *within 2 years preceding application* which has been (a) certified by the Academy of Family Mediators (AFM) or (b) approved by the Center as functionally equivalent or superior to an AFM 40 hour course; or, **check here** \_\_\_\_\_
  
2. I have reached the age of majority in Alabama and I have at least a masters degree and at least five years of professional experience in any of the fields of psychology, social work, or mental health and am in good standing with any licensing board or agency and able to present a current license number if applicable; and have successfully completed a 40 hour mediation course on domestic relations issues *within 2 years preceding application* which has been (a) certified by the Academy of Family Mediators (AFM) or (b) approved by the Center as functionally equivalent or superior to an AFM 40 hour course; or, **check here** \_\_\_\_\_
  
3. I have reached the age of majority in Alabama and I have either a baccalaureate degree and at least eight years of management or administrative experience in a professional, business or governmental entity OR at least a high school diploma and 10 years of management or administrative experience in a professional, business, or governmental entity; and have successfully completed a 40 hour mediation course on domestic relations issues *within 2 years preceding application* which has been (a) certified by the Academy of Family Mediators (AFM) or (b) approved by the Center as functionally equivalent or superior to an AFM 40 hour course. In addition, I have served professionally as a mediator in at least 10 domestic relations mediations, within the 2 years immediately preceding submission of an application for registration, and I will present documentation of the mediations and names, addresses and telephone numbers of persons who may be contacted regarding the mediations. **check here** \_\_\_\_\_

**PART II: BACKGROUND INFORMATION**

**GENERAL:**

1. Name: \_\_\_\_\_  

Last
First
Middle

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 Law Firm or Organization (Current Employment) \_\_\_\_\_  


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 Street or P.O. Box \_\_\_\_\_  


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City
County
State
Zip Code
  
2. Telephone Numbers: Business \_\_\_\_\_ Fax \_\_\_\_\_
  
3. Website: \_\_\_\_\_
  
4. E-mail \_\_\_\_\_

5. Date of Birth: \_\_\_\_\_

**EDUCATION:**

1. What is the highest degree that you have attained to date? \_\_\_\_\_

2. Colleges and universities attended:

<i>Name of school</i>	<i>City/State</i>	<i>Dates Attended</i>	<i>Degree(s)</i>	<i>Major</i>
		<i>From/To</i>	<i>Attained</i>	

_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

**OCCUPATION:**

1. What is/was your primary occupation?  
\_\_\_\_\_

2. What is your current employment status?

\_\_\_\_ Employed full-time in your primary occupation

\_\_\_\_ Employed part-time in primary occupation

\_\_\_\_ Retired

\_\_\_\_ Unemployed

3. Please list all professional licenses, with license numbers, and affiliations which you consider relevant to your registration.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. If you have been with your current employer less than four years, please list prior employer & dates.

\_\_\_\_\_  
\_\_\_\_\_

**OTHER BACKGROUND:**

1. Have you, either as an adult or a juvenile, been convicted for any violation of any law? Exclude traffic violations unless they resulted in the revocation or suspension of your license.

\_\_\_\_ No                      \_\_\_\_ Yes If yes, list and **include dates**.

\_\_\_\_\_  
\_\_\_\_\_

2. Have you ever been denied a license for a business, trade, or profession (e.g., CPA, real estate broker, attorney, physician), or had such license revoked?  
\_\_\_\_\_No \_\_\_\_\_Yes If yes, please explain, and **include dates**.

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3. Have you ever been disbarred, suspended, censured, or otherwise reprimanded, disqualified or disciplined as an attorney, as a member of another profession, or as a holder of public office?  
\_\_\_\_\_No \_\_\_\_\_Yes If yes, list and **include dates**.

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### **PART III: TRAINING**

#### **A. Record of General Mediation Training**

Describe the general mediation training you have received (minimum of a 20 hour mediation training program, approved by the Center, including mock mediation exercises and ethics education).

**Please attach copies of certificates of completion provided by the trainer.**

<i>Course/hours</i>	<i>Trainer/Organization</i>	<i>Location</i>	<i>Date</i>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

#### **B. Record of Divorce Mediation Training**

Describe the divorce mediation training you have received (minimum of a 40 hour divorce mediation training program, approved by the Center, including mock mediation exercises and ethics education).

**Please attach copies of certificates of completion provided by the trainer.**

<i>Course/hours</i>	<i>Trainer/Organization</i>	<i>Location</i>	<i>Date</i>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

### **PART IV: MEDIATIONS**

Please detail the most recent five cases where you have served as the mediator. Under "type" please state the subject area, i.e. divorce, banking, employment, construction, etc. (Leave blank if you have not conducted any mediations.) **If you are applying under the 10 mediation standard, check here \_\_ and list five additional cases on the back of this sheet.**

Type	Date(s)	Name of Mediator	Place	# of Sessions
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____
4.	_____	_____	_____	_____
5.	_____	_____	_____	_____

**PART V: PRACTICE AREAS**

If you have expertise in specific subjects that you think might be useful to someone looking for a mediator, please list up to 12 below. Refer to website, [www.alabamaadr.org](http://www.alabamaadr.org) for a list of subjects.

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**PART VI: ADDITIONAL COUNTIES** **SELECT ALL STATE**

**OR SELECT UP TO 14 ADDITIONAL COUNTIES, other than your home county, to which you will travel** \_\_\_\_\_

**PART VII: REFERENCES**

List names, addresses and phone numbers of persons (parties, attorneys of parties, judges, co-mediators) who may be contacted regarding your service as a mediator.

<i>Name</i>	<i>Address</i>	<i>Telephone</i>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**NOTE: If you not yet mediated any cases, list names, addresses and phone numbers of persons who may be contacted as general references.**

<i>Name</i>	<i>Address</i>	<i>Telephone</i>
_____	_____	_____
_____	_____	_____
_____	_____	_____

**PART VIII: LIMITATIONS**

Please identify any limits on your mediation practice, such as subject matter or geography.

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**PART IX: YOUR MEDIATION RATE**

\_\_\_\_\_ Hourly or other rate \_\_\_\_\_ Other fees or charges

**PART X: ADDITIONAL LANGUAGES IN WHICH YOU MEDIATE**

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**PART XI: APPLICATION/REGISTRATION FEES**

I have enclosed the following:

Application fee of \$30 \_\_\_\_\_

Registration fee of \$125 \_\_\_\_\_

**Please make checks payable to: The Alabama Center for Dispute Resolution**

**PART XII: AUTHORIZATION AND RELEASE FOR GOOD CHARACTER INVESTIGATION, SIGNATURE AND NOTARY PUBLIC SEAL**

For the purpose of suitability for registration and continuation on the Alabama State Court Mediator Roster or the Alabama Arbitrator Roster, I \_\_\_\_\_, consent to have an investigation made as to my good character. I authorize the Office(s) of Professional Responsibility where I am licensed (for neutrals who hold a professional license), and/or any other person, firm, company, corporation, court, association, or agency to furnish the Alabama Center for Dispute Resolution (Center) and the Alabama Supreme Court Commission on Dispute Resolution (Commission) with information regarding any charges or complaints filed against me, including any complaints erased by law, whether formal or informal, pending or closed, or any other pertinent data; and to permit copies to be made of such documents, records or other information for the purpose of discussion regarding Roster registration. The records will not include any information with respect to a juvenile offense. I give permission to the Center and Commission to contact references and otherwise investigate to verify all information provided.

I agree to notify the Center of any conviction of a misdemeanor or felony within 30 days of such conviction and include copy of the order or orders pursuant to which the conviction was entered. I also agree to notify the Center with a change of address within 30 days. In addition, I certify that the information supplied on this application is correct, and that to the best of my knowledge I qualify for the category of registration of which I have applied. I agree to abide by the Alabama Code of Ethics for Mediators, and to provide up to 10 hours of pro bono mediation if requested.

State of \_\_\_\_\_ County of \_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Signature of Notary Public

State of \_\_\_\_\_

My Commission Expires on: \_\_\_\_\_

Please return application and attachments to:  
**ALABAMA CENTER FOR DISPUTE RESOLUTION**  
**Post Office Box 671**  
**Montgomery, Alabama 36101**