



**MARYLAND COUNCIL FOR DISPUTE RESOLUTION  
APPLICATION FORM**

**MEDIATOR ASSESSMENT/CERTIFICATION**

Name \_\_\_\_\_

Address \_\_\_\_\_

Home Telephone \_\_\_\_\_

Cell Telephone \_\_\_\_\_

**Mediation Training**

*A. Basic Mediation Training (40 hours)*

Name of Training \_\_\_\_\_

Name of Trainer/Trainers \_\_\_\_\_

Number of Classroom Hours \_\_\_\_\_

Location of Training and Dates \_\_\_\_\_

**Please Note:** Please attach a certificate or letter of completion and a copy of the agenda for the training. If this has been lost, please attach whatever documentation you have. Attachments for Basic Mediation Training are as follows:

\_\_\_\_\_

*B. Advanced Training:* If you have had advanced mediation training beyond the basic 40 hours, or if you have had mediation training in a content area, please fill out the section below. If necessary, please add a separate sheet.

Name of Training \_\_\_\_\_

Name of Trainer/Trainers \_\_\_\_\_

Subject Matter (if not obvious from training title) \_\_\_\_\_

Number of Classroom Hours \_\_\_\_\_

Location of Training and Dates \_\_\_\_\_

Please Note: Please attach a certificate or letter of completion and a copy of the agenda for the advanced training. If this has been lost, please attach any documentation you have.

Attachments for advanced or specialized training are as follows: \_\_\_\_\_

**Education**

Degree \_\_\_\_\_ Subject \_\_\_\_\_ Date \_\_\_\_\_ Educ.Institution \_\_\_\_\_

Degree \_\_\_\_\_ Subject \_\_\_\_\_ Date \_\_\_\_\_ Educ. Institution \_\_\_\_\_

**Experience/Practice**

*Practice as a Mediator:*

Please indicate how many mediation cases you have mediated (or approximate if exact number not known); of what kinds of cases; and over how much time.

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

*Mediation Style*

Please indicate your mediation style (check all that apply): \_\_\_\_\_ Facilitative,  
\_\_\_\_\_ Transformative, \_\_\_\_\_ Evaluative \_\_\_\_\_ (Other – please describe)

\* Please remember to attach your Self Statement

*Practice in a Non-Mediation Area:*

If you have practiced in a specialty area or profession and therefore have a working

knowledge of a content area as listed in the appendix of the MCDR Mediator Qualifications, please complete the statement below:

I hereby certify that as \_\_\_\_\_, I have practiced in the  
(Profession such as therapist, lawyer, accountant, etc.)  
area of \_\_\_\_\_ for \_\_\_\_\_ years and  
(Content area)  
have handled at least \_\_\_\_\_ cases of this type.

**References.**

Two references are required; references may be from a trainer, a mentor or someone who has co-mediated with you. If such people are no longer available to you, two references from experienced mediators familiar with your work can be used. Please indicate below if such reference letters/forms are attached or are being sent separately:

\_\_\_\_\_ Reference forms attached.

\_\_\_\_\_ References are being sent under separate cover. References are:

a. \_\_\_\_\_

b. \_\_\_\_\_

**Oath and Certification of Compliance with Ethical Standards**

**I swear or affirm under the penalties of perjury that the information given in this application is true and correct and I certify that I have read the Maryland Standards of Conduct for Mediators and that I agree to abide by them.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
date

**Please send your completed application and self statement to:**

MCDR  
c/o Ramona Buck  
Co-Chair of MCDR Certification Committee  
512 Scott Drive  
Silver Spring, MD 20904

**Payment for Certification**

The fee for Certification is \$325 for MCDR members; \$395 for MCDR non-members

Payment can be made by **check** made payable to the Maryland Council for Dispute Resolution and submitted as shown above with your application.

Payment can be made using **PayPal** by sending your name, mailing address, phone and e-mail address to Barry M. Weissman, Treasurer at: MCDRadmin@earthlink.net. You will receive an invoice via e-mail sent through our website, www.MCDR.org. Payment must be made through the website and received at PayPal prior to your Certification day.

Payment can be made using **cash \$US** paid to the Chair of the MCDR Certification Committee. A cash receipt will be issued.