

# APPLICATION FOR ACCREDITATION OR RE-ACCREDITATION AS A MEDIATOR UNDER THE NATIONAL MEDIATOR ACCREDITATION SYSTEM AND

# APPLICATION FOR APPOINTMENT TO THE ASSOCIATION'S LIST OF SUPREME COURT MEDIATORS 2014-2015

Completed application forms must be returned to Jo Wilton at the Bar Association by 5pm Thursday 19 September 2013.

PLEASE NOTE IT WILL NOT BE POSSIBLE TO PROCESS LATE APPLICATIONS

Before completing this form you need to familiarize yourself with the National Mediator Accreditation System, Approval Standards and Practice Standards, which are available on the Mediator Standard's Board website <a href="http://www.msb.org.au/sites/default/files/documents/Approval%20Standards.pdf">http://www.msb.org.au/sites/default/files/documents/Approval%20Standards.pdf</a> and ensure that you qualify for accreditation.

The information requested on this form will be used to process your application for accreditation as a mediator under the National Mediator Accreditation System and application for recommendation for appointment to the Bar Association's list of Supreme Court mediators should you wish to apply for that list. If your application is successful, your name will be listed on the Bar Association's website.

# PART A: GENERAL INFORMATION – TO BE COMPLETED BY ALL APPLICANTS

#### **MEDIATOR STATUS**

| I am applying for accr    | editation with the NSW Bar for the fir | est time and (optional) applying for the   |
|---------------------------|--|--|
| Association's List of Sup | reme Court Mediators (complete Part    | s A, B or C, E & F)                        |
| ☐ I was accredited or re- | accredited as a mediator with the NSW  | V Bar in 2011 and wish to be re-accredited |
| and (optional) apply for  | the Association's List of Supreme Cou  | urt Mediators (complete Parts A, D, E & F) |
| ☐ I was accredited or re- | accredited as a mediator with the NSW  | We Bar in 2012 and wish to apply for the   |
| Association's List of Sup | reme Court Mediators only (complete    | e Parts A, E & F)                          |
|                           |  |  |
| PERSONAL AND PE           | RACTICE DETAILS                        |  |
|                           |  |  |
| FAMILY NAME:              |  | _ POST NOMINAL:                            |
|                           |  |  |
| GIVEN NAMES:              |  |  |
|                           |  |  |
| CHAMBERS:                 |  |  |
|                           |  |  |
| DX:                       |  |  |
|                           |  |  |
| CHAMBERS PH: _            | MOBILE: _                              |  |
|                           |  |  |
| F-MAIL:                   |  |  |

# GOOD CHARACTER REQUIREMENTS

| 1                                      | Do you have the personal qualities and appropriate life, social and work experience to conduct the process of mediation independently and professionally?   |  |  |  |
|--|---|--|--|--|
|  | YES □ NO □ If NO, please attach a written statement disclosing the matters.   |  |  |  |
| 2                                      | Do you have any serious conviction or impairment that could influence your capacity to discharge your obligations in a competent, honest and appropriate manner?  |  |  |  |
|  | YES   NO   If YES, please attach a written statement disclosing the matters.  |  |  |  |
| 3                                      | Do you hold a current practising certificate issued by the NSW Bar Association?   |  |  |  |
|  | YES □ NO □  |  |  |  |
| 4                                      | Do you have at least five years practice as a legal practitioner?   |  |  |  |
|  | YES □ NO □  |  |  |  |
| 5                                      | Have you ever been disqualified from practising by a professional body?   |  |  |  |
|  | YES □ NO □ If YES, please attach a written statement giving details.  |  |  |  |
| 6                                      | Have you ever been removed or suspended from acting as a mediator by any accrediting body?  |  |  |  |
|  | YES □ NO □ If YES, please attach a written statement giving details.  |  |  |  |
| (to be                                 | ATOR ACCREDITATION FEE completed if you are applying for mediator accreditation or re-accreditation – but not if you ly applying for the Association's list of Supreme Court Mediators)   |  |  |  |
| mediat<br>year p<br>require<br>the rer | Mediator Standards Board (MSB) has introduced a registration fee for nationally accredited for of \$100 inclusive of GST payable at the time of accreditation or re-accreditation for a two eriod commencing after 1 March 2012. RMABs such as the NSW Bar Association are red to collect the fee, retaining \$10 to contribute towards the costs of collection and to remit maining \$90 to the MSB. A mediator accredited with more than one RMAB will be required the fee once only. |  |  |  |
| 7                                      | <b>a.</b> Are you currently accredited as a mediator with another Recognised Mediator Accreditation Body (RMAB) apart from the NSW Bar Association?   |  |  |  |
|  | YES  if yes, which RMAB?  |  |  |  |
|  | NO 🗖  |  |  |  |

|     | <b>b.</b> If YES, have you paid the new \$100 fee to that RMAB as required by the Mediato Standards Board? |   |  |
|-----|--|---|--|
|     | YES 🗖  | if yes, please attach a copy of your receipt to this application form so that you are not levied twice  |  |
|     | NO 🗖   | if no, you will receive an invoice in October if you are accredited or re-accredited by Bar Council   |  |
| COM | PLIANC   | CE UNDERTAKING  |  |
| 8   | I have:  | read and understood my obligations under both the:  Approval Standards, for mediators seeking approval under the current national mediator accreditation system, ('Approval Standards'); and  Practice Standards, for mediators seeking approval under the current national mediator accreditation system ('Practice Standards').                           |  |
|     | YES 🗖  | NO 🗖  |  |
| )   | I undertake to comply with the Approval Standards, the Practice Standards and any relevant legislation.    |   |  |
|     | YES 🗖  | NO 🗖  |  |
| 10  | a.   | I understand that, if my application for accreditation, re-accreditation and/or appointment to the Association's list of Supreme Court mediators is successful, my accreditation or appointment to the list for a period of two years is dependent upon my holding a practising certificate and professional indemnity insurance during that entire period. |  |
|     | YES 🗖  | NO 🗖  |  |
|     | b.   | I also understand if I am appointed to the Association's list for 2 years, my continued appointment depends upon my continued accreditation as a mediator by the Bar Association.   |  |
|     | YES □  | NO 🗖  |  |

Please ensure that you also complete the Agreement and Declaration on Pages 11 and 12 after you have completed the Parts of this form appropriate to your situation

## PART B: APPLICATION FOR ACCREDITATION AS A 'NEW' MEDIATOR

Only complete this Part if you are applying for accreditation as a mediator for the first time and have limited experience

#### **COMPETENCE, TRAINING AND EDUCATION**

Please refer to Section 7 of the Practice Standards and Section 5 of the Approval Standards

| Have you completed a 5 day course of initial mediation training of at least 38 complies with the requirements set out in s5 of the Approval Standards since 1 January 2008 that enal comply with the Approval Standards? |   |  |  |
|--|---|--|--|
|  | YES  NO I If NO, you <u>do not qualify</u> to be accredited as a 'new' mediator.  |  |  |
| 12   | If the answer to question 11 is YES, please provide the following details:  |  |  |
|  | • name of course:   |  |  |
|  | name of provider:   |  |  |
|  | • number of days:   |  |  |
|  | date/s on which course was attended:  |  |  |
| 13   | Please confirm that you have attached a copy of a certificate/s of completion of the training referred to in question 12 above.                 |  |  |
|  | YES $\square$ NO $\square$ If NO, provide reasons as to why this has not been provided  |  |  |
| 14   | Do you have the knowledge, skills and ethical understandings required by Section 7 of the Practice Standards?                                   |  |  |
|  | YES □ NO □  |  |  |
| 15   | Have you completed a mediator skills assessment involving at least a 1.5 hour simulation as required by section 5(2) of the Approval Standards? |  |  |
|  | YES INO II If YES, please attach a copy of the mediator skills assessment. If you cannot provide this please explain why.                       |  |  |

- In order to qualify for accreditation you must be able to demonstrate some experience in mediation. The achievement of **ten points** during the course of the applicant's practice as a legal practitioner is required. For this purpose:
  - having acted as a mediator constitutes three points per mediation;
  - having acted as a co-mediator constitutes two points per mediation; and
  - having represented a party at a mediation constitutes two points per mediation.

### PART C: APPLICATION FOR ACCREDITATION AS AN 'EXPERIENCE QUALIFIED' MEDIATOR

Only complete this Part if you are applying for accreditation as a mediator for the first time and have extensive mediation experience

### **COMPETENCE, TRAINING AND EDUCATION**

Please refer to Section 7 of the Practice Standards and Section 5 of the Approval Standards

| 17 | Have you completed a 3 or 5 day course of initial mediation training?   |  |  |
|----|---|--|--|
|    | YES $\square$ NO $\square$ If you have answered NO, please attach to this form detailed reasons as to why, despite receiving no training, you should still be considered for accreditation. |  |  |
| 18 | If the answer to question 17 is YES, please provide the following details:  |  |  |
|    | • name of course:   |  |  |
|    | • name of provider:+  |  |  |
|    | • number of days:   |  |  |
|    | • date/s on which course was attended:  |  |  |
| 19 | Please confirm that you have attached a copy of a certificate of completion of the training referred to in question 18 above.   |  |  |
|    | YES $\square$ NO $\square$ If NO, provide reasons as to why this has not been provided  |  |  |
| 20 | Have you worked as a mediator prior to 1 September 2013?  |  |  |
|    | YES   NO   If NO, you do not qualify to be accredited as an 'experienced qualified' mediator and should instead complete PART B above.  |  |  |
|    |   |  |  |
| 21 | Do you have the knowledge, skills and ethical understandings required by Section 7 of the Practice Standards?   |  |  |
|    | YES □ NO □  |  |  |

| 22 | •        | Have you conducted at least 25 hours of mediation, co-mediation or conciliation in the last two years?   |  |  |
|----|----------|--|--|--|
|    | NO 🗖     | If NO, proceed to question 23  |  |  |
|    | YES □    | If YES, please provide the following and then proceed to question 25:  |  |  |
|    | •        | number of hours as a mediator/conciliator (approximately):   |  |  |
|    | •        | number of hours as a co-mediator/conciliator(approximately):   |  |  |
|    | •        | <b>details</b> of the mediations or conciliations undertaken, including the nature of the dispute and the dates you conducted them (you may attach a separate note): |  |  |
|    |          |  |  |  |
|    |          |  |  |  |
|    |          |  |  |  |
|    |          |  |  |  |
|    |          |  |  |  |
| 23 |          | answer to question 22 is NO, have you conducted at least 10 hours of mediation, co ion or conciliation in the last two years?  |  |  |
|    | YES □    | NO 🗖   |  |  |
| 24 | If you l | nave conducted at least 10 hours of mediation, but less than 25 hours – please   |  |  |
|    | ` '      | ils of the mediations you have conducted by answering question 22 in respect of nediations, and  |  |  |
|    | (b) the  | reason for not undertaking at least 25 hours:  |  |  |
|    |          | family, career or study break  |  |  |
|    |          | illness  |  |  |
|    |          | other (please specify)   |  |  |

|  | Have you completed at least 20 hours of continuing professional development (as detailed in Approval Standard 6(1)(b)) in the last two years?   |  |  |  |
|--|---|--|--|--|
| YES □ NO □ If NO, proceed to question 26   |   |  |  |  |
| If YE  | S, please state the number of hours you have completed for the following activities:  |  |  |  |
|  | attending continuing professional development courses, educational programs, seminars or workshops on mediation or related skill areas as referred to in Section 7 of the Practice Standards (up to 20 hours) |  |  |  |
|  | representing clients in four mediations (up to 8 hours)   |  |  |  |
| presentations at mediation or ADR seminars or workshops, including 2 hour preparation time for each hour delivered (up to 16 hours)  |   |  |  |  |
|  | mentoring less experienced mediators and enabling observational opportunities, or being mentored (up to 10 hours)   |  |  |  |
|  | coaching/instructing/mentoring trainee or less experienced mediators in training courses (up to 10 hours)   |  |  |  |
|  | role playing for trainee mediators and candidates for mediation assessment or observing mediations (up to 8 hours)  |  |  |  |
|  | external supervision/auditing of your mediation practice (up to 15 hours)   |  |  |  |
| If you answered "no" to question 25, are you resident in a linguistically and culturally divers community for which specialised skills and knowledge are needed and/or from a rural/or remote community where there is difficulty in attending mediation training courses? |   |  |  |  |
| YES  | □ NO □  |  |  |  |
|  | , please provide full details for your reasons for answering "no" to question 25 and ls of your practice  |  |  |  |
|  |   |  |  |  |
|  |   |  |  |  |
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|  |   |  |  |  |

### PART D: APPLICATION FOR RE-ACCREDITATION AS A MEDIATOR

Only complete this Part if you were accredited or re-accredited by the Bar Association in <u>2011</u>

#### **COMPETENCE, TRAINING AND EDUCATION**

Please refer to Section 7 of the Practice Standards and Section 5 of the Approval Standards

| 27 | Have you conducted at least 25 hours of mediation, co-mediation or conciliation in the last two years?  |  |  |
|----|---|--|--|
|    | NO ☐ If NO, proceed to question 28  |  |  |
|    | YES   If YES, please provide the following and then proceed to question 30:   |  |  |
|    | • number of hours as a mediator/conciliator (approximately):  |  |  |
|    | • number of hours as a co-mediator/conciliator(approximately):  |  |  |
|    | <ul> <li>details of the mediations or conciliations undertaken, including the nature of the<br/>dispute/s as well as the dates you conducted them (please be specific and attach a<br/>separate note if you need more space)</li> </ul> |  |  |
|    |   |  |  |
|    |   |  |  |
|    |   |  |  |
|    |   |  |  |
|    |   |  |  |
|    |   |  |  |
|    |   |  |  |
| 28 | If your answer to question 27 is NO, have you conducted at least 10 hours of mediation, co mediation or conciliation in the last two years?   |  |  |
|    | YES D NO D  |  |  |
| 29 | If you have conducted less than 25 hours, did you attend the ACDC mediation refresher course organised by the Bar Association on either 12 August or 19 August 2013?  |  |  |
|    | YES D NO D  |  |  |
|    | If yes, please attach a copy of your certificate and assessment.  |  |  |

| 30 | •      | If you have conducted at least 10 hours of mediation, but less than 25 hours – please provide the reason for not undertaking at least 25 hours:   |  |  |
|----|--------|---|--|--|
|    |        | initial mediation training undertaken only within last two years  |  |  |
|    |        | lack of work  |  |  |
|    |        | family, career or study break   |  |  |
|    |        | illness   |  |  |
|    |        | other (please specify)  |  |  |
| 31 | -      | Have you completed at least 20 hours of continuing professional development (as detailed in Approval Standard 6(1)(b)) in the last two years?   |  |  |
|    | YES 🗆  | NO  If NO, proceed to question 31   |  |  |
|    | If YES | , please state the number of hours you have completed for the following activities:   |  |  |
|    |        | attending continuing professional development courses, educational programs, seminars or workshops on mediation or related skill areas as referred to in Section 7 of the Practice Standards (up to 20 hours)   |  |  |
|    |        | representing clients in four mediations (up to 8 hours)   |  |  |
|    |        | presentations at mediation or ADR seminars or workshops, including 2 hours of preparation time for each hour delivered (up to 16 hours)   |  |  |
|    |        | mentoring less experienced mediators and enabling observational opportunities, or being mentored (up to 10 hours)   |  |  |
|    |        | coaching/instructing/mentoring trainee or less experienced mediators in training courses (up to 10 hours)   |  |  |
|    |        | role playing for trainee mediators and candidates for mediation assessment or observing mediations (up to 8 hours)  |  |  |
|    |        | external supervision/auditing of your mediation practice (up to 15 hours)   |  |  |
| 31 | comm   | answered "no" to question 30, are you resident in a linguistically and culturally diverse unity for which specialised skills and knowledge are needed and/or from a rural/or e community where there is difficulty in attending mediation training courses? |  |  |
|    |        | NO □<br>please provide details:   |  |  |
|    |        |   |  |  |

# PART E: APPLICATION FOR APPOINTMENT TO THE ASSOCIATION'S LIST OF SUPREME COURT MEDIATORS

| 32   | I wish to apply for selection to the Association's list of Supreme Court mediators:  |                 |  |                           |
|--|--|-----------------|--|---------------------------|
|  | YES 🗖 NO 🗖   |                 |  |                           |
| 33   | Areas of mediation practice (please tick the areas in which you practice):   |                 |  |                           |
|  | Commercial   |                 | Defamation                                     |                           |
|  | Complex Personal Injury  |                 | Professional Negligence                        |                           |
|  | Family Provision Claims  |                 | Construction                                   |                           |
|  | Property (Relationships) Act   |                 |  |                           |
|  | DARTE AC   | DEELEN          | T AND DECLADATI                                | ION                       |
|  |  |                 | <u>[T AND DECLARAT]</u><br>  by ALL applicants | <u>.ON</u>                |
| The Bar Council requires applicants to bring to its attention any adverse circumstances, including circumstances that do or that may reasonably be expected to adversely affect the professional or community standing and good repute of the applicant, including any adverse findings by any disciplinary body, and convictions or bankruptcy proceedings or bankruptcy debt agreement/arrangements since the date of admission to practice.  You do not need to notify matters which you have already notified to the Bar Council.  34 Are there any adverse circumstances relevant to you being accredited as a mediator under the Australian National Mediator Standards and/or being recommended for appointment to the Association's List of Supreme Court mediators? |  |                 |  |                           |
|  | YES INO II IF YES, plea  | -               |  | to this form              |
| <u>AGRI</u>  | <u>EEMENT</u>  |                 |  |                           |
| and/o  | erstand that accreditation as a<br>r appointment to the Association<br>derstand that I have the rigointment.   | on's list of Su | apreme Court mediators is                      | for a period of two years |
| _  | e to the Association making er<br>tor and/or on the Association's  | -               |  | ess to be an accredited   |
| list of  | I undertake to notify, in writing, the Bar Council, if my name is included on the Bar Association's list of accredited mediators and/or Association's list of Supreme Court mediators, if and when I become aware of any adverse circumstances within the extended meaning as referred to above. |                 |  |                           |

| I consent to my name being put forward to courts, tribunals, organisations or persons by the Bar Association for referral for mediations. By signing my name below, I give my consent to the Bar Association's sending my name forward in this manner. |   |  |  |
|--|---|--|--|
| YES NO   |   |  |  |
| <u>DECLARATION</u>   |   |  |  |
| I,   |   |  |  |
| declare that the information and particulars set out in in fact to the best of my knowledge.   | the above application true in substance and |  |  |
| Signed:  | Dated:                                      |  |  |

#### COLLECTION, USE AND DISCLOSURE OF PERSONAL INFORMATION

Information about you is collected, stored, used and disclosed by the New South Wales Bar Association in accordance with the *Privacy Act 1988* (Cth).

#### CLOSING DATE FOR APPLICATIONS IS THURSDAY 19 SEPTEMBER 2013

Please send to Jo Wilton, Policy Lawyer, NSW Bar Association, DX 1204 Sydney