

Shared Neutrals: A Federal Interagency Collaborative Effort in Support of ADR

MEDIATOR PROFILE/APPLICATION

To be considered for acceptance on the SN Roster for the National Capital Region, federal employees need to do the following:

1. Fill out the Mediator Profile
2. Obtain the written permission of supervisor by downloading the Supervisor Approval form and having the Supervisor sign.
3. Provide documentation of completion of at least 40 hours of training in basic mediation skills.
4. Provide two letters of recommendation that address communication skills and ability to work with others.
5. Submit the documents referenced in 1-4 above via email to sharedneutrals@fmcs.gov with the subject line "APPLICATION."

Name: _____ Position: _____

Federal Agency, Office: _____

Work Address: _____

Phone number: _____ E-Mail: _____

Supervisor's Name and Phone Number: _____

Dispute Resolution Training and Experience: documentation required (see p. 2) Types of courses completed, trainer/organization, length of class (days/hours):

Include number of mediations conducted; list experience with other ADR processes (e.g., interest-based negotiation, early neutral evaluation, etc. (*optional for new applicants*):

Related Experience and Skills:

Describe the relevant experience (e.g., education, work or job related, volunteer):

List other skills that could aid you in a mediated/facilitated process (e.g., foreign language, sign language):

Documentation (required for registration)

1. Attach evidence of ADR training, including a minimum of 40 hours in basic mediation skills.
2. Attach two letters of recommendation. Letters should address communication skills and ability to work with others. The recommender's contact information should also be included.

Certification

I hereby certify that the information provided in this form or annexed hereto is true to the best of my knowledge and accurately reflects my qualifications to serve as a mediator for Shared Neutrals.

I agree that acceptance of assignments through Shared Neutrals will not interfere with my regular job responsibilities and that I will keep my supervisor informed of my dispute resolution work.

I agree to follow Shared Neutrals Procedure, including notifying Shared Neutrals if I am contacted with a request for mediation by another agency, keeping Shared Neutrals advised of the status of the case, and assuring that evaluation forms and case closing forms are referred to Shared Neutrals.

I agree to keep my conflict resolution skills updated.

Furthermore, I hereby agree that if any problem arises related to my involvement as a neutral or any representations I have made related to this program, it shall be resolved by the Office of Shared Neutrals Program, whose determination shall be final on all matters.

I have read the Shared Neutrals Standards of Practice and agree to abide by all such Rules when I am asked to act impartially.

Signature of Applicant

Date

The information provided herein will be used only for program administration purposes by Shared Neutrals.

