

STATE OF NORTH CAROLINA

APPLICATION FOR CERTIFICATION TO CONDUCT DISTRICT CRIMINAL COURT MEDIATIONS PURSUANT TO G.S. 7A-38.3D

G.S. 7A-38.3D; Rules Implementing Mediation In Matters Pending In District Criminal Court

Name And Address Of Applicant, Date Of Birth, Telephone No., Fax No., E-Mail Address

INSTRUCTIONS: An Applicant for provisional certification need complete only Section IV, of this Application and his/her sponsoring community mediation center must complete Section V.A. An Applicant for certification must complete Sections I, II, and III, of this Application and his/her sponsoring center must complete Section V.B. or Applicants applying for provisional certification need complete only Sections IV and V.

I apply for provisional certification or certification to conduct District Criminal Court Mediations pursuant to G.S. 7A-38.3D and the Supreme Court of North Carolina's Rules Implementing Mediation in Matters Pending in District Criminal Court.

SECTION I. REQUIREMENTS FOR CERTIFICATION

A. Affiliation (Rule 7.A.).

- At the time of this Application, I serve on the staff of or am a volunteer with the community mediation center named below which is established pursuant to G.S. 7A-38.5.

Name and Address of Center

B. Training, Education and Experience (Rule 7.B). Complete only subsection 1. or 2. below.

1.a. Training.

- I have attended at least 24 hours of training in a district criminal court mediation training program that is certified by the Dispute Resolution Commission or that substantially complies with the requirements set forth in Rule 8.A. (Attach copy of certificate(s) from trainer(s) evidencing completion).

b. Education and Experience.

I have the following education and experience. (You must check at least one box below):

- I hold a four-year degree from an accredited college or university. (Attach a copy of your diploma, if available, or other verification.) or
I have four years of post-high school education through an accredited college, university or junior college or I have four years of full-time work experience, or any combination thereof. (Attach copies of transcripts or other verification, a resume or letter describing the work experience you wish the Commission to consider); or
I have two years experience as a staff or volunteer mediator at a community mediation center. (Attach a copy of a letter(s) verifying your employment or service as a volunteer issued by the center(s) which you served for the two-year period).

- 2.a. I am currently certified by the Dispute Resolution Commission as a superior court (MSC) or district court family financial (FFS) mediator; or

- b. I currently hold Advanced Practitioner Membership in the Association for Conflict Resolution (ACR). (Attach a copy of a certificate or other verification from ACR).

C. Observations and Co-Mediations/Mediations (Rule 7.C).

1. Observations.

Complete only subsection a. or b. below.

- I have observed at least two court-referred district criminal court mediations conducted by a mediator certified pursuant to these rules (Attach Certificate of Observation). or
I have observed at least two court-referred district criminal court mediations conducted prior to Nov. 8, 2008, by a mediator affiliated with a community mediation center established under G.S. 7A-38.5 and who has mediated at least ten (10) district criminal courts cases. (Attach Certificate of Observation.)

2. Co-Mediations/Mediations

- I have co-mediated or mediated at least three court-referred district criminal court cases under the observation of staff affiliated with a community mediation center established pursuant to G.S. 7A-38.5 and whose district criminal court mediator training program has been certified by the Dispute Resolution Commission (Attach Certificates of Co-mediations or Mediations).

- D.  I am familiar with the statute, rules, and practice governing district criminal court mediations in North Carolina (Rule 7.D).
- E.  I agree to comply with all requirements of the Dispute Resolution Commission for continuing mediator education or training (Rule 7.G).

**SECTION II. CHARACTER**

**A. Criminal Convictions/Disciplinary Actions (Rule 7.E.).**

1. Have you been convicted of a crime *(excluding infractions)*?  Yes,  No. If "yes," please explain.  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
  
2. Are you currently being investigated by or have you been disciplined by any professional, licensing board or agency; e.g., the State Bar or Board of Psychologists?  Yes,  No. If "yes," please explain below and identify the body that is investigating you or has disciplined you.  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
  
3. Have you been sanctioned by a judge?  Yes,  No. If "yes," please identify the judge and explain:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
  
4. Have you served as a neutral e.g., mediator, neutral evaluator or arbitrator, in another state?  Yes,  No. If "yes," were you disciplined in connection with that service, e.g., decertified, taken off a register, placed on probation?  
 Yes  No. If "yes," please explain, identify the body that disciplined you and provide a telephone number:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
  
5. Have you been asked to terminate your affiliation, either your employment or your service as a volunteer, with any community mediation center operating in North Carolina?  Yes,  No. If "yes," please identify the center, state the year employment or volunteer service was terminated and explain why:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**B. Responsibility for Ongoing Reporting of Character Information (Rule 7.E).**

- Once certified, I agree to report to the Dispute Resolution Commission, as soon as I have notice, any criminal convictions, disbarments, other disciplinary complaints or actions and any judicial sanctions of which I am the subject.

**C. Background Check (Rule 7.E).**

- a.  For the past five (5) years, I have lived only in North Carolina. *(Please complete and attach to your application form AOC-A-210, Criminal and Sex Offender Record Sheet.)*
- b.  Within the past five (5) years, I have lived in a state other than North Carolina. *(Please attach to your application a copy of an FBI Identification Record (national finger print search) completed within the past year.)*

**D. Release.**

By signing the release below, I give the Dispute Resolution Commission my permission to contact any judge, agency, or community mediation center identified in my responses to subsections 1-5 above and I give my permission for the entity contacted to speak with or release information to the Commission regarding the matters I reported in 1-5 above:

|      |   |
|------|---|
| Date | Signature Of Applicant Authorizing Release of Information to the Commission |
|------|---|

**SECTION III. COMMITMENT TO SERVE**

I agree to commit to serve the district criminal courts of North Carolina as a mediator under the direct supervision of a community mediation center established under G.S. 7A-38.5 for at least two years from the date of this Application (Rule 7.F.)

**SECTION IV. PROVISIONAL CERTIFICATION**

A.  Pursuant to Rule 7, I am applying for provisional certification prior to January 1, 2009. At the time of this Application. I am certified by and affiliated with the community mediation center named below which is established pursuant to G.S. 7A-38.5.

*Name and Address of Center*

[Empty box for Name and Address of Center]

B.  I understand that such provisional certification is for a one year period only and I agree that during the course of that year that I will work toward complying with all the requirements established in Rule 7 for certification as a district criminal court mediator.

**SECTION V. CENTER RECOMMENDATION**

This portion of the Application is to be completed by staff of the community mediation center with which the applicant is currently affiliated. Complete subsection A if applicant seeks Provisional Certification or Subsection B if applicant seeks Certification:

**A. Application for Provisional Certification.**

- 1.  This Applicant is currently certified by and affiliated with the center identified in Section IV.A of this Application. Attached to this Application is a letter from the center endorsing this Applicant and verifying that she/he has the education, training, experience, skills and good character necessary to conduct district criminal court mediations.
- 2.  Over the next year, this center agrees to assist this applicant in fully complying with the requirements for certification set forth in Rule 7.

**B. Application for Certification.**

- 1.  This Applicant is currently affiliated as a staff member or as a volunteer with the community mediation center identified in section I.A of this Application.
- 2.  Center staff has met face-to-face with this Applicant less than 30 days from the date of this Applicant's request to apply for certification and has reviewed this application with him/her and discussed the documentation that will be required.
- 3.  The center endorses this Applicant and has attached to this Application it's letter of recommendation affirming that this Applicant possesses the education, training, experience, skills and good character necessary to conduct district criminal court mediations.

|             |  |   |
|-------------|--|---|
| <i>Date</i> | <i>Center Director or his/her Designee</i> | <i>Signature of Center Director or his/her Designee</i> |
|-------------|--|---|

**CERTIFICATION**

I, the undersigned Applicant, certify that I have given true, accurate and complete information on this Application to the best of my knowledge. I am of good moral character, I will adhere to all ethical rules and other rules adopted by the Dispute Resolution Commission and all rules adopted by the Supreme Court of North Carolina for mediation of district criminal court cases.

|   |                                |  |
|---|--------------------------------|--|
| <b>SWORN/AFFIRMED SUBSCRIBED TO BEFORE ME</b>         |                                | <i>Date</i>  |
| <i>Date</i>   | <i>Signature</i>               | <i>Signature Of Applicant</i>                        |
| <i>Title Of Person Authorized To Administer Oaths</i> |                                | <i>Name And Address Of Applicant (Type Or Print)</i> |
| <input type="checkbox"/> <i>Notary</i>                | <i>Date Commission Expires</i> |  |
| <b>SEAL</b>   | <i>County Where Notarized</i>  |  |

**FOR COMMISSION USE ONLY**

Pursuant to G.S. 7A-38.3D and the Supreme Court of North Carolina's Rules Implementing Mediation In Matters Pending In District Criminal Court, you are certified as a mediator to conduct mediations of district criminal court matters.

|             |                             |                  |
|-------------|-----------------------------|------------------|
| <i>Date</i> | <i>Name (Type Or Print)</i> | <i>Signature</i> |
|-------------|-----------------------------|------------------|

# STATE OF NORTH CAROLINA

JUDICIAL BRANCH OF GOVERNMENT  
Human Resources Division  
PO Box 2448  
Raleigh, NC 27602

Courier Box 56-10-50  
HumanResources@nccourts.org

## CRIMINAL AND SEX OFFENDER RECORD SEARCH

| NAME      |            |             |
|-----------|------------|-------------|
| Last Name | First Name | Middle Name |

| DRIVERS LICENSE     |       |               |
|---------------------|-------|---------------|
| Drivers License No. | State | Date Of Birth |

| ADDRESS |  |  |
|---------|--|--|
|---------|--|--|

If you have moved within the last seven (7) years please complete the following information. Attach additional pages if necessary.

|                        |                    |    |
|------------------------|--------------------|----|
| Current Street Address | Dates Of Residency |    |
|                        | From               | To |

|      |        |       |     |
|------|--------|-------|-----|
| City | County | State | Zip |
|------|--------|-------|-----|

|                         |                    |    |
|-------------------------|--------------------|----|
| Previous Street Address | Dates Of Residency |    |
|                         | From               | To |

|      |        |       |     |
|------|--------|-------|-----|
| City | County | State | Zip |
|------|--------|-------|-----|

|                         |                    |    |
|-------------------------|--------------------|----|
| Previous Street Address | Dates Of Residency |    |
|                         | From               | To |

|      |        |       |     |
|------|--------|-------|-----|
| City | County | State | Zip |
|------|--------|-------|-----|

| PREVIOUS NAMES |  |  |
|----------------|--|--|
|----------------|--|--|

List ALL previous names used and the effective dates of each (including married, maiden and aliases). Attach additional pages if necessary.

|           |            |             |                 |
|-----------|------------|-------------|-----------------|
| Last Name | First Name | Middle Name | Effective Dates |
|           |            |             | From To         |

|           |            |             |                 |
|-----------|------------|-------------|-----------------|
| Last Name | First Name | Middle Name | Effective Dates |
|           |            |             | From To         |

|           |            |             |                 |
|-----------|------------|-------------|-----------------|
| Last Name | First Name | Middle Name | Effective Dates |
|           |            |             | From To         |

I certify that the information given is true and correct.

|      |           |
|------|-----------|
| Date | Signature |
|------|-----------|

### TO BE COMPLETED BY HUMAN RESOURCES

#### Results Of Criminal Record Search

- No Record Found  
 Following Record(s) Found

#### Results Of Sex Offender Search

- No Record Found  
 Following Record(s) Found

|      |         |      |         |
|------|---------|------|---------|
| Date | Offense | Date | Offense |
|------|---------|------|---------|

|      |         |      |         |
|------|---------|------|---------|
| Date | Offense | Date | Offense |
|------|---------|------|---------|

|      |         |      |         |
|------|---------|------|---------|
| Date | Offense | Date | Offense |
|------|---------|------|---------|

|              |              |
|--------------|--------------|
| Completed by | Completed by |
|--------------|--------------|