

**APPLICATION FOR TENNESSEE ADRC APPROVAL OF
40-HOUR CIVIL MEDIATION TRAINING COURSE
Pursuant to Tennessee Supreme Court Rule 31 Section 17(c)**

Please return this form with the required enclosures to the Programs Manager
Alternative Dispute Resolution Commission,
511 Union Street, Suite 600
Nashville, TN 37219
615-741-2687 ext. 288, 800-448-7970 ext. 288

Program Information

Program Name: _____

Program Date(s) [if new trainers or syllabi are used, a new application must be submitted]:

Program Site(s): _____

Sponsor Name: _____

Address of Sponsor: _____

Contact Person: _____ Telephone: _____

E-mail: _____ Fax: _____

Maximum number of participants per training program: _____

Facilitator Information

Please attach a resume for each trainer.

Primary Trainer(s)

Name(s): _____

Listed as Rule 31 Mediator: Yes No

If no, please list the training provider, the dates, and the number of hours of training this trainer(s) received.

Completed 10 mediations within the last year? Yes No

Assistant Trainer(s)

Name(s): _____

Listed as Rule 31 Mediator: Yes No

If no, please state the dates, the training provider, and the number of hours of training this trainer(s) received.

Completed 10 mediations within the last year? Yes No

Curriculum Information

Will each participant participate in role-plays? _____

Indicate what roles participants will play: _____

Describe how role-plays will be evaluated: _____

Will each trainer view no more than two role plays simultaneously? Yes No

Will each participant be involved in role play as a mediator and a party? Yes No

What procedure will be instituted to ensure participants attend the entire session? _____

Teaching techniques utilized during training programs will include (please check all that apply):

_____ Lecture _____ Group Discussion _____ Readings

_____ Written Exercises _____ Mediation Simulation

_____ Other (Please describe): _____

Agenda Summary

Has this program been approved by the Continuing Legal Education Commission? Yes No

If yes, for how many hours is it approved? _____

Refer to your syllabus to indicate how many hours are provided in distinct lectures and exercises for the following topics:

Hours, Reference to Syllabus (e.g., time and page #)	Topic
	Rule 31 Standards and Procedures
	Conflict Resolution Concepts
	Negotiation Dynamics
	Court Process
	Mediation Process and Techniques
	Communication Skills
	Community Resources and Referral Process
	Cultural and Personal Background Factors
	Attorneys and Mediation
	The Unrepresented Party and Mediation
	State Rules, State Statutes and Local Forms Regarding Civil Mediation
	Techniques for Mediating with Multiple Parties
	Handling Situations Where Individuals Do Not Have Authority to Settle
	Observation of Role-playing of Civil Mediation
	Standards of Conduct and Ethics Under Rule 31*

*Note: Be sure to complete the additional table on the following page.

Please initial in the left column that each of the ethics topics in the right column will be covered:

Initials	Ethics Focus Point
	Confidentiality and Reporting Requirements
	Necessity of Self-determination
	Conflicts of Interest
	Necessity of Impartiality
	Promoting Mutual Respect of the Parties
	Liability
	Role of Mediators as Officers of the Court
	Disciplinary Procedures
	Professional Courtesy Toward Attorneys and Other Mediators
	No Unreasonable Delays or Fees
	Advertising

Total number of training hours on the agenda (including role plays): _____

Additional comments on the training program: _____

Checklist

The following materials must accompany your application:

- Complete Syllabus
- Bibliography of Required Readings
- Summary of Course Materials
- Summary of Each Trainer’s Qualifications
- Copy of Evaluation Form to Be Used by Participants
- This Form

Verification of Application

I hereby certify that the application submitted for approval by the Alternative Dispute Resolution Commission for Civil Mediation Training is accurate and complete.

 Date

 Signature of Training Program Sponsor