



EARLY SETTLEMENT MEDIATION – CITY OF NORMAN PROGRAM ALTERNATIVE DISPUTE RESOLUTION SYSTEM

APPLICATION FOR VOLUNTEER MEDIATOR PLACEMENT

Thanks for your interest in the Early Settlement mediation program. The program is funded by the Supreme Court of Oklahoma and utilizes **volunteers** who have been trained and certified by the Administrative Director of the Court. The initial basic training is a 20-hour course provided at no charge to volunteer applicants who agree to give 10 hours of volunteer service back to the program each year. There are generally a couple of basic trainings held each year.

Upon receiving your application, the program director will review it and, upon acceptance, notify you of training opportunities as they become available. Additional information may be requested by the local program director in order to process the application. Upon completion of the training you will be scheduled to observe a certified mediator conducting a small claims case or something similar, and then be observed mediating a case to be considered for certification.

Additional information about Early Settlement is available at adrs.oscn.net

INSTRUCTIONS: Please complete this application in full, and send by email, fax, or postal mail to the Program Office. If completing by hand, please print legibly.

Early Settlement Mediation – City of Norman Program
City of Norman
201 W Gray
Building B
Norman, OK 73070
jessie.jackson@normanok.gov
Questions? 405-217-7750

Name:	Application Date:
Address:	Phone: (home)
City & Zip:	Phone: (work)
Occupation/Business:	Phone: (cell)
(Email)	(Fax)



PLEASE ANSWER THE FOLLOWING QUESTIONS –

How did you learn about Early Settlement? Friend Co-Worker Family Other:

What do you expect to gain from this training? (*Maximum 400 characters*)

Have you previously applied for training with any other Early Settlement program?

Yes No If yes, list the program and approximate date of application.

Early Settlement Program	Date of Application

Please list any previous mediation or communication training as well as other forms of Alternative Dispute Resolution (ADR) training that you have received.

Description of Training	Provided by	No. of Hours	Date M/YR

Please list past and present volunteer activities with which you have been involved with?

Organization	Description of Volunteer Activity	Start Date	End Date



Have you ever been convicted of a felony within the past 5 years? Yes No

If yes, please explain: (Maximum 400 characters)

Do you have a reliable form of transportation? Yes No

Do you speak and/or read languages other than English (including American Sign Language)?

Yes No If yes, please list:

Please list three (3) references who know you and your work from both paid or volunteer work settings and/or educational settings. Do not list relatives as references. In providing us with these references, you accept that our discussions with your references are confidential. This is important to assure complete candor.

Name	Address	Phone	Relationship

Questions for College/University Students Only:

What college/university do you attend?

What is your major or field of specialization?

Will you be available during school holidays, including summer vacation? Yes No

When are you planning to graduate?

Do you plan to reside in Oklahoma following graduation? Yes No

If, yes, what will be your county of residence?



Please mark an (x) next to each statement acknowledging that you have read it and are in agreement with the statement:

- I can commit to **two (2) or more** years of volunteer service following certification with a minimum of 10 hours per year to the Early Settlement Mediation Program.
- I can mediate in a small claims court or perform office related tasks, such as follow-up surveys monthly.
- I understand that I will **not** be monetarily compensated for mediation services nor reimbursed for expenses incurred while mediating for Early Settlement (If applicable, parking fees may be reimbursed).
- I can remain neutral and impartial in a dispute between others with conflicting points of view.
- I can refrain from giving advice and/or my opinion in order to permit the parties to create their own resolutions to disputes.
- I can encourage the parties to reach their own mutually negotiated solution(s).
- I can follow a specific script made to conduct mediations.
- I UNDERSTAND THAT COVERAGE OF MEDIATORS UNDER THE OKLAHOMA DISPUTE RESOLUTION ACT (I.E. CONFIDENTIALITY, LIABILITY PRIVILEGE, ETC.) IS AFFORDED ONLY TO THOSE WHO ARE MEDIATING FOR EARLY SETTLEMENT WHEN THEY ARE ACTING AS VOLUNTEERS.*** People who mediate as private practitioners or for a fee are not in anyway protected by the Dispute Resolution Act and cannot claim state certification.
- I understand that Early Settlement provides a valuable community service of which I will be an important and integral part.
- I understand that the training workshop is offered to me at **no** cost, provided that I render the equivalent of **two (2) or more years** of volunteer service to the community through the Early Settlement Mediation Program.



Why do you want to volunteer as an Early Settlement mediator?

Please describe why you are interested in becoming a volunteer mediator for the Oklahoma Early Settlement Program including your strengths and weaknesses.

Please mark an (X) below the **times** you would be able to mediate for Early Settlement:

Day of Week	AM (9-noon)	PM (1 to 5)
Monday	<input type="checkbox"/>	<input type="checkbox"/>
Tuesday	<input type="checkbox"/>	<input type="checkbox"/>
Wednesday	<input type="checkbox"/>	<input type="checkbox"/>
Thursday	<input type="checkbox"/>	<input type="checkbox"/>
Friday	<input type="checkbox"/>	<input type="checkbox"/>

I hereby certify that the information provided in this application is accurate to the best of knowledge.

Volunteer Mediator Candidate

Date





SUPREME COURT OF OKLAHOMA
ALTERNATIVE DISPUTE RESOLUTION SYSTEM
VOLUNTEER MEDIATOR CANDIDATE AGREEMENT

On this ___ day of ___, 20___, I, ___, upon having been interviewed by the program director, understand that I have just completed the first in a series of volunteer qualifying events for the area mediation program. The next step in the series is the satisfactory completion of a 20-hour introductory mediation training program. My satisfactory completion will be based on evaluations by the local program director with input from the training program facilitator, group leader and coach. The evaluation is focused on my understanding of the mediation process as demonstrated through performance. I understand that this training will qualify me to move on to the next phase of certification as a mediator pursuant to the provisions of the Dispute Resolution Act, 12 O.S. Supp. 1991 sections 1801 et seq., and I will be notified by the local program director or coordinator of my additional certification requirements including, at a minimum, observing a mediation conducted by an certified mediator and being observed while conducting a mediation.

Upon attaining certification as a mediator pursuant to the provisions of the Act, I agree to provide a minimum of 10 hours per year of service to the certified programs of the Oklahoma Alternative Dispute Resolution System (ADRS). If I choose not to continue in this process, I will notify the local program director or coordinator, in writing, of my intent to discontinue participation in the mediation program.

I understand that the Act (i.e. certification, confidentiality, liability, privilege, etc.) is applicable to me only when I am mediating for a certified program of the Oklahoma ADR System and am acting as a volunteer. I will not claim, advertise or assert that I am certified as a mediator except in reference to my volunteering under the authority of a certified program of the Oklahoma ADR System.

I UNDERSTAND THAT I MAY BE RELEASED, AT ANY TIME, FROM DUTIES AND RESPONSIBILITIES AS A CANDIDATE AND/OR CERTIFIED MEDIATOR, BY THE LOCAL PROGRAM DIRECTOR OR COORDINATOR, OR THE MEDIATION TRAINER. I UNDERSTAND THAT IF I OBTAIN CERTIFICATION IT WILL EXPIRE ONE (1) YEAR FROM THE DATE OF CERTIFICATION, UNLESS EXTENDED BY THE ADMINISTRATIVE DIRECTOR OF THE COURTS. IF I LOSE MY CERTIFICATION, I UNDERSTAND THAT ANY REFERENCE I MAKE TO IT MUST LIST THE DATES BETWEEN WHICH IT WAS VALID.

Volunteer Mediator Candidate

Date

Local Program Director

Date

