



The New South Wales Bar Association

ABN 18526 414 014

**APPLICATION FOR ACCREDITATION OR RE-ACCREDITATION  
AS A MEDIATOR  
AUSTRALIAN NATIONAL MEDIATOR STANDARDS  
AND  
APPLICATION FOR APPOINTMENT TO THE ASSOCIATION'S LIST  
OF SUPREME COURT MEDIATORS  
2012-2013**

**Completed application forms must be returned to Jo Wilton at the Bar Association by  
5pm Friday 23 September 2011.**

**PLEASE NOTE IT WILL NOT BE POSSIBLE TO PROCESS LATE APPLICATIONS.**

Before completing this form you need to familiarise yourself with the Australian National Mediator Standards, Approval Standards and Practice Standards, which are available on the Bar Association's website at <http://www.nswbar.asn.au> 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 Australian National Mediator Standards 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 accreditation with the NSW Bar for the **first time** and (optional) **apply for the List of Supreme Court Mediators** (complete Parts A, B or C, E, F & G)
- I was accredited as a mediator with the NSW Bar in **2009 and wish to be re-accredited** and (optional) **apply for the List of Supreme Court Mediators** (complete Parts A, D, E, F & G)
- I was accredited or re-accredited as a mediator with the NSW Bar in **2010 and wish to apply for the List of Supreme Court Mediators only** (complete Parts A, E, F & G)

**PERSONAL AND PRACTICE DETAILS**

**FAMILY NAME:** \_\_\_\_\_

**GIVEN NAMES:** \_\_\_\_\_

**CHAMBERS / BUSINESS ADDRESS:** \_\_\_\_\_

Please note that a post office box is not  
a practice address.

**DX:** \_\_\_\_\_

**CHAMBERS PH:** \_\_\_\_\_ **DIRECT PH:** \_\_\_\_\_

**E-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.

## OTHER ACCREDITATIONS

- 7 Are you currently accredited as a mediator with another Recognised Mediator Accreditation Body (RMAB) apart from the NSW Bar Association? (*please note that this information is being collected to comply with a census being conducted by the National Mediation Accreditation Committee (NMAC) of mediators accredited under the national system and is not for use by the Bar Association*)  
NO
- YES  If YES, please provide details of the other organisation/s:
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## COMPLIANCE UNDERTAKING

- 8 I have read and understood my obligations under both the:
- Australian National Mediator Standards, Approval Standards, for mediators seeking approval under the current national mediator accreditation system, ('**Approval Standards**'); and
  - Australian National Mediator Standards, Practice Standards, for mediators seeking approval under the current national mediator accreditation system ('**Practice Standards**').
- YES  NO

9 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 Bar Association's Supreme Court list is successful, my accreditation or appointment to the Court for a period of two years is dependent upon my holding a practising certificate and professional indemnity insurance during that entire period.

YES  NO

for b. I also understand if I am appointed to the Bar Association's Supreme Court list 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 Page 9 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*

11 Have you completed a 5 day course of initial mediation training of at least 38 hours that complies with the requirements set out in s5 of the Approval Standards since 1 January 2008 or "top-up" training for a course undertaken before 1 January 2008 that enables you to comply with the National Standards?

YES  NO  If NO, you do not qualify to be accredited as a 'new' mediator.

12 If the answer to question 11 is YES, please provide the following details:

- name of course/s: \_\_\_\_\_
- name of provider/s: \_\_\_\_\_
- number of hours/days: \_\_\_\_\_
- date/s on which course/s were undertaken:  
\_\_\_\_\_

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  NO  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  NO  If YES, please attach a copy of the mediator skills assessment. If you cannot provide this please explain why.

16 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.

Have you obtained at least 10 points of experience in mediation in any of the situations outlined above?

NO  If NO, you do not qualify for accreditation

YES  If YES, please provide FULL details of how you have obtained the 10 points required:

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### **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 3-5 day course of initial mediation training?

YES  NO  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/s: \_\_\_\_\_
- name of provider/s: \_\_\_\_\_
- number of hours/days: \_\_\_\_\_
- date/s on which courses were undertaken: \_\_\_\_\_

**19** Please confirm that you have attached a copy of a certificate/s of completion of the training referred to in question 18 above.

YES  NO  If NO, provide reasons as to why this has not been provided

**20** Have you worked as a mediator prior to 23 September 2011?

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):  
\_\_\_\_\_
- details of the mediations or conciliations undertaken, including the nature of the dispute: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**23** If your answer to question 22 is NO, have you conducted at least 10 hours of mediation, co-mediation or conciliation in the last two years?

YES  NO

**24** 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) \_\_\_\_\_

25 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 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)

26 If you answered “no” to question 25, are you resident in a linguistically and culturally diverse 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

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

*(Only complete this Part if you were first accredited by the Bar Association in 2009)*

### **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):  
\_\_\_\_\_
- details of the mediations or conciliations undertaken, including the nature of the dispute/s: \_\_\_\_\_

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**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  NO

**29** 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) \_\_\_\_\_

**30** 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 If you answered “no” to question 30, are you resident in a linguistically and culturally diverse 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

**PART E: APPLICATION FOR APPOINTMENT TO THE BAR ASSOCIATION’S LIST OF SUPREME COURT MEDIATORS**

*(For appointment to the Bar Association’s list of Supreme Court mediators you must be already accredited as a mediator by the Bar Association or apply for accreditation using this form)*

- 32 I wish to apply for selection to the Bar Association’s list of Supreme Court mediators:
- YES  NO

- 33 Areas of mediation practice (please tick the areas in which you practice):

Commercial	<input type="checkbox"/>	Defamation	<input type="checkbox"/>
Complex Personal Injury	<input type="checkbox"/>	Professional Negligence	<input type="checkbox"/>
Family Provision Claims	<input type="checkbox"/>	Construction	<input type="checkbox"/>
Property (Relationships) Act	<input type="checkbox"/>		

**PART F: BAR ASSOCIATION’S MENTORING SCHEME FOR MEDIATORS**

- 34 If your application for accreditation under the National Standards is successful, are you willing to act as a mentor for up to 3 hours per year in the Bar Association’s mentoring scheme for mediators and agree to your name being listed on the Association’s webpage as a mentor?
- YES  NO

**PART G – AGREEMENT AND DECLARATION**

*To be completed by ALL applicants*

**Please note:**

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.

35 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 Bar Association's list of Supreme Court mediators?

YES  NO  If YES, please provide full details and attach them to this form

### **AGREEMENT**

I understand that accreditation as a mediator under the Australian National Mediator Standards and/or appointment to the Bar Association's list of Supreme Court mediators is for a period of two years. I understand that I have the right after that period to apply for reaccreditation and/or reappointment.

I agree to the Association making enquiries about me concerning my fitness to be an accredited mediator and/or Supreme Court mediator.

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 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

### **DECLARATION**

I, \_\_\_\_\_ of \_\_\_\_\_

declare that the information and particulars set out in the above application true in substance and in fact to the best of my knowledge.

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).

**PLEASE ENSURE THAT YOU HAVE ANSWERED ALL QUESTIONS BEFORE  
RETURNING THIS FORM TO THE BAR ASSOCIATION**

**CLOSE DATE FOR APPLICATIONS IS FRIDAY 23 SEPTEMBER 2011  
PLEASE SEND TO JO WILTON, NSW BAR ASSOCIATION**