OFFICE OF THE EXECUTIVE SECRETARY

Supreme Court of Virginia

**TRAINER** APPLICATION FOR CONTINUING MEDIATOR EDUCATION (CME)

# COURSE CERTIFICATION

Applications for CME certification must be submitted at least thirty (30) days in advance of the training date. DRS will review applications within thirty (30) calendar days of receipt. Please note that extra time should be allotted beyond the thirty (30) days for the applicant to make any changes/revisions that may be necessary.

This application will be considered pursuant to certification criteria established by the Judicial Council of Virginia and without regard to race, color, religion, political affiliation, national origin, disability, sex, or age.

**SECTION I TRAINER INFORMATION (Please type or print)**

|  |  |
| --- | --- |
| Name of person/ organization responsible for training |  |
| Trainer Name(s), if different |  |
| Trainer’s VA certification number(s) |  |
| Telephone |  |
| Email(s) |  |

*If trainer is not approved as a trainer by DRS, please attach a resume/bio to this application that includes their experience with the topic and with training adults.*

## SECTION II COURSE INFORMATION

|  |  |
| --- | --- |
| Title |  |
| Length (using 50 min. hour) |  |
| Indicate the number of each CME type requested  | Non-ethics  | Ethics[[1]](#footnote-1) |
| List assistants required to deliver training (E.g., panelists, subject matter experts, etc., or “none”) |  |

1. If course is less than two hours, check here and attach the following:

* a description of your qualifications for presenting this topic
* a course outline or summary that describes the content
* course evaluation form

1. If course is two hours or more, check here and attach the following:
* a description of your qualifications for presenting this topic
* a detailed training agenda with exact times to be spent on each subject specified
* course outline
* course materials including any handouts, exercises, manuals, role-plays, etc.
* course evaluation form
* a description of the training format such as lecture, discussion, small group exercises, role-plays, demonstration, panel, etc*.*
1. How is this course relevant to mediation? (Attach additional sheets if needed.)

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1. How will this course help mediators? (Attach additional sheets if needed.)

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## SECTION III BACKGROUND

1. Have the trainer(s) ever been convicted of a felony, a misdemeanor (includes reckless and aggressive driving), a traffic violation resulting in suspension or revocation of a driver’s license, or a DUI/DWI? Conviction includes guilty or nolo contendere pleas. Yes No

If Yes, list on the lines provided below (please include the specific code section(s) violated)*.* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2. Have the trainer(s) ever 1) had a disciplinary action related to a profession, including mediation (for example, a professional license suspended or revoked); 2) had any professional privileges curtailed; and/or 3) relinquished a professional privilege or license while under investigation? Yes No

 If Yes, describe on the lines provided below.

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3. If the answer to question #1 or #2 above was “Yes,” please describe the impact, if any, this could have on the trainer’s ability to train mediators.

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## SECTION IV CERTIFICATION

I understand that information regarding this course may be provided to individuals seeking training by the Office of the Executive Secretary.

I hereby certify that the information provided in this application is true to the best of my knowledge. I understand that all information herein is subject to verification and that the training may be observed at any time by a representative of the Office of the Executive Secretary as a part of the certification process.

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 Signature of Trainer Date

Please forward application to: Dispute Resolution Services

Office of the Executive Secretary

Supreme Court of Virginia

100 N. Ninth Street, Third Floor

Richmond, VA 23219

Or email it to drsapplications@vacourts.gov.

Please contact Dispute Resolution Services, 804-786-6455, or email drsapplications@vacourts.gov with questions.

1. Only ***mediator*** ethics may receive ethics credit. Please note that a session given ethics credit by a training organization could be denied ethics credit by DRS. [↑](#footnote-ref-1)