SUPERIOR COURT OF CALIFORNIA
COUNTY OF FRESNO
PILOT PROGRAM FOR EARLY MANDATORY MEDIATION

MEDIATOR APPLICATION

Name_____
Address_____
City_____
State_____ Zip_____
Phone_____ Fax_____
E-mail_____

Occupation_____ How Long_____
Employer_____
Address_____
City_____
State_____Zip_____
Phone_____ Fax_____
E-mail_____

College Attended_____ Degree_____
Graduate or Law School Attended_____
Degree or Bar #_____Date Awarded_____

Mediation Training: Include institutions, programs and dates.
_____
_____
_____
_____

Mediation Experience: Include number of mediations conducted in past 3 years.
_____
_____
_____
_____

MEDIATOR APPLICATION
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Professional Affiliations with Dispute Resolution Organizations; give dates.

_____
_____
_____

Areas of Expertise:

Business	_____	Construction	_____
Employment	_____	Environment	_____
Healthcare	_____	Insurance	_____
Malpractice	_____	Personal Injury	_____
Real Estate	_____	Other	_____

Foreign Languages in which you are capable of conducting a mediation.

_____
_____

Insurance Carrier_____
Address _____
City _____State _____Zip _____
Phone _____

Current Reimbursement Rate _____

Other Relevant Information _____
_____
_____
_____

Signature below certifies that all of the above information is true and correct and that applicant agrees to adhere to Court Standards of Professional Conduct.

Signature _____ Date _____

Return this form and your personal narrative to:

Mari Henson, ADR Administrator
Fresno Civil Courthouse
1130 O Street
Fresno, CA 93721-2220
(559) 457-1908 Fax (559) 457-1691
mhenson@fresno.courts.ca.gov