

**FAMILY MEDIATOR  
INITIAL APPLICATION CHECKLIST**

**I. Name of Applicant** \_\_\_\_\_

**II. \_\_\_\_\_ Application Fee - \$300: Payable to State of NH**

**III. \_\_\_\_\_ Application Part 1: Public Information**

- |   |   |
|---|---|
| <p>_____ 1. Name</p> <p>_____ 2. Mediation Business Name (optional)</p> <p>_____ 3. Mediation Mailing Address, Phone &amp; Email</p> <p>_____ 4. Mediation Practice Setting(s)</p> <p>_____ 5. Mediation affiliations (last 5 years)</p> <p>_____ 6. ~Higher education, provider and dates of attendance</p> <p>_____ 7. ~24 hours of Mediation Training (provider &amp; dates)</p> <p>_____ ~Is core older than 3 years old - Include Additional Requirements Page</p> <p>_____ 8. ~16 hours New Hampshire law training (NH provider &amp; dates)</p> <p>_____ 9. ~Domestic Violence training (NH provider &amp; dates)</p> <p>_____ 10. ~Internship completed? (minimum: 2 cases)</p> <p>_____ Regular (min: 20 hrs/3 agreements) _____ FLP/MHP (min: 10 hrs/2 agreements)</p> <p>_____ Case Summaries attached</p> <p>_____ Mediated agreements attached</p> <p>_____ Supervisors named</p> <p><b>Yes No</b> *FL/MH Practitioner</p> <p>_____ 11. ~If Yes – Must have copy diploma/transcript + current letter of good standing</p> <p>_____ Practiced 7 years?</p> <p>_____ Practice description last 3 years</p> <p>_____ Jurisdictions last 7 years</p> <p>_____ 1/3 of practice - divorce/parenting?</p> <p>_____ 12. Agree to Abide by Model Standards</p> <p>_____ 13. Description of mediation experience (if any)</p> <p>_____ 14. ~Any other mediation licenses/certificates held?</p> <p>_____ 15. ~Any other licenses/certificates held?</p> <p>_____ 16. Name/address of certifying agency and dates</p> <p>_____ 17. ~Past discipline action concerning mediation license/certification</p> <p>_____ 18. ~Pending discipline action concerning mediation license/certification</p> <p>_____ 19. ~Abuse finding/License revocation/Felonies/misdemeanor convictions</p> <p>_____ 20. Fee</p> <p>_____ 21. Signed and dated</p> | <p><i>~ Items with this symbol<br/>have a required<br/>supporting document.</i></p> |
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**III. \_\_\_\_\_ Application Part 2: Confidential**

- \_\_\_\_\_ 1. Name
- \_\_\_\_\_ 2. Prior name (if changed)
- \_\_\_\_\_ 3. Home Addresses
- \_\_\_\_\_ 4. Home Telephone number
- \_\_\_\_\_ 5. Home Email (optional)
- \_\_\_\_\_ 6. Birth date and place
- \_\_\_\_\_ 7. Employment names & addresses
- \_\_\_\_\_ 8. Past employment
- \_\_\_\_\_ 9. Social Security number
- \_\_\_\_\_ 10. Names/Addresses of 3 recommendations
- \_\_\_\_\_ 11. Signed and dated

Reminder:  
Submit original + and 2  
copies of all materials.

**IV. Required Documentation: *These attachments should be separate from the application.***

- 1. Authenticated document showing Bachelors degree or higher – may be sent directly to Board
- 2. Core Mediation training (24 hours)
- 3. New Hampshire training (16 hours, may be taken with Core)
- 4. D.V. training (8 hours, may taken with Core)
- 5. Internship
  - Case summary form + 50 word synopsis for each case
  - Mediated Agreement(s)
    - No more than 5 Agreements
    - One “complete” case w/in last 12 months
    - Information identifying the parties redacted
    - Paragraph format

**Board’s Mailing Address**  
Family Mediator Certification  
Board  
c/o Judicial Council  
25 Capitol Street– Room 424  
Concord, NH 03301

**If applicable,**

- Family Law Practitioner?
  - Copy of diploma or transcript
  - Letter of good standing from NH Supreme Court
- Mental Health Practitioner?
  - Copy of diploma or transcript
  - Letter in good standing from Board of Mental Health Practice
- Core more than three years?
  - Additional Requirements Sheet
  - Completion certificates for the additional training: 3 hours each, within last 12 months
    - Family Law update
    - Mediator Ethics
    - DV
    - Mediation Skills
- Copies of other licenses/certificates
- Statement(s) describing disciplinary violations
- Statement(s) describing revocations or criminal convictions

**V. Sent directly to the Board**

- Evaluations for each case from each supervisor
- Three (3) Letters of Recommendation
  - Letters from all intern supervisors required

**If needed, who else can send recommendations:**

- 1. Director of core mediation training program
- 2. Co-mediators
- 3. Attorneys for parties in case mediated by intern