

It is not necessary to fill in this form for the Director if the Director is also a Trainer.

Staff Information: Trainer

Applicant Training Program _____

Trainer Name _____ Family Mediator Certificate Number _____

1. Does this Trainer have at least 50 hours of previous experience as a presenter in any combination of a portion of the 40-hour core mediation training, or a continuing education presentation for mediators, which was at least 3 hours long?

Yes No

If Yes, provide copies of at least 10 evaluation forms from a core training or 20 evaluations from a continuing education presentation.

2. Does this Trainer have at least 6 hours of training taken within the three years in either Advanced Mediation Skills or Teaching the Adult Student?

Yes No

If Yes, fill in the chart and attach copies of the course completion certificates.

Workshop Title	Provider/Sponsor	Hours Per Subject Matter		Date(s) of Training
		Advanced Mediation	Teaching the Adult Student	
	Totals			

3. Has this Trainer performed, within the last 3 years, at least 250 hours of face-to-face mediation in at least 20 family cases?

Yes No

If Yes, fill in the chart entitled Mediation Experience.

Applicant Training Program _____

Trainer Name _____

Mediation Experience

Case	Starting & Ending Dates	Type of Case	Total # Hours Expended
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			
13.			
14.			
15.			
16.			
17.			
18.			
19.			
20.			

Trainer Training Qualifications

Applicant Training Program _____

Trainer Name _____

Check all topics trainer presents as part of the core training:

Mediation Skills Mediator Ethics
 NH Law Domestic Violence

Describe this Trainer’s Qualifications for teaching each of the topics checked above.

*If teaching NH Law – provide NH Bar information.

*If teaching Domestic Violence – provide information about Coalition or other relevant affiliation information.

Has this trainer taken at least 3 hours of training within the last twelve months (*within 6 months for NH Law) about each topic (s)he is responsible for presenting? Yes No

If yes, fill in the chart and attach copies of the course completion certificates, marked as attachments TQ – 1, TQ– 2, etc.

Workshop Title	Provider/Sponsor	Training Type ^A	Hours Per Subject Matter				Date(s) of Training
			Mediation Skills	Mediator Ethics	NH Law*	Domestic Violence	
	Totals						

^ATraining Type: P = Live, in person A = Audiotape V = Videotape O = On-line