

**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
2317 Tuolumne Street
Fresno, CA 93721-1220
(559) 497-4195 Fax (559) 497-4293
mhenson@fresno.courts.ca.gov