**Re-Instatement Application Form**

This Application Form is only for people who have previously been NMAS Accredited as a Mediator and that accreditation has been suspended due to a Leave of Absence or other reason or Lapsed.

Please see clause 6.1 of the NMAS for more details. [National Mediator Accreditation System](https://msb.org.au/themes/msb/assets/documents/national-mediator-accreditation-system.pdf)

 6.1 An applicant seeking re-instatement after a period of leave of absence or lapsed or suspended accreditation, must:

1. disclose the date from which they were first granted accreditation under the NMAS and specify the period of leave of absence or the date upon which their accreditation lapsed or was suspended;
2. meet the approval requirements set out in Sections 2.1 above;
3. provide evidence to an RMAB that they have met the accreditation renewal requirements described in Section 3 above in the two years immediately prior to seeking re-instatement;
4. where the practice requirement in Section 3.2 or Section 3.3 has not been met, undertake supplementary practical training, coaching and/or assessment, as approved by the RMAB, to address the shortfall;
5. provide evidence to the RMAB that any conditions imposed at the time of suspension or grant of a period of leave of absence have been met prior to seeking re-instatement.

6.2 Accreditation will be re-instated from the date upon which the relevant RMAB assesses the applicant as having satisfied the requirements of Section 6.1.

6.3 Re-instatement of accreditation in terms of Section 6.2 cannot be granted more than once in every four years.

* If you are not eligible for re-instatement you will have to complete the NMAS Training and Assessment course again.
* If you are eligible for re-instatement, you can complete supplementary training to prepare and your assessment using our NMAS Assessment Program. Please do not enrol in that course unless we have confirmed that you are eligible.

[NMAS Training Archives | Mediation Institute](https://www.mediationinstitute.edu.au/product-category/training/nmas-training/)

**New NMAS Accreditation or Renewal?**

This is not the correct form. You can download the New Membership Application or Renewal Application on our website **-** [Membership | Mediation Institute](https://www.mediationinstitute.edu.au/join-mediation-institute/)

# Personal Details

|  |  |  |  |
| --- | --- | --- | --- |
| First Name |  | Last Name |  |
| Date of Birth |  | Gender |  |
| Company Name  |  |
| Company Website |  |
| Job Title  |  |
| **Preferred Contact Details** |
| Business Address |  |
| Postal Address (if different) |  |
| Preferred Contact Number  |  |
| Other Contact Number  |  |
| Preferred Email |  |
| Other Email  |  |

# Reinstatement Application only

Please provide the following information:

|  |  |
| --- | --- |
| Date you were first granted NMAS Accreditation  |  |
| Leave of Absence: From & to dates or |  |
| Date your accreditation lapsed or |  |
| Date your accreditation was suspended |  |

# Approval Requirements

You must confirm that you still meet the approval requirements to be a NMAS Accredited Mediator in accordance with standard 2.1. In order to demonstrate this please supply the following:

1. Written references from two (2) members of your community who have known you for more than

three (3) years. The reference must say that you are of good character, or you can demonstrate
that you have already satisfied this requirement under another system.

|  |  |
| --- | --- |
|   |  2 written references attached or  |
|   |  Specify and attach other evidence:   |

|  |  |
| --- | --- |
| **Y/N** | **Declarations**  |
|  | Have you ever been refused NMAS Accreditation or had your accreditation renewal or suspended or cancelled? *If yes provide more information.*  |
|  | Have you been disqualified from any type of professional practice? *If yes provide more information.*  |
|  | Have you had any criminal convictions? *If* *yes provide more information.* |
|  | Have you had any impairment that could influence your capacity to discharge your obligations in a competent, honest, and professional manner? *If yes provide more information.*  |
|  | Do you agree to comply with the NMAS Standards, Mediation Institute Code of Ethics and with any relevant legislation, professional standards and any other requirements that may apply to ALL professional roles you undertake? <https://www.mediationinstitute.edu.au/mediation-institute-forms/>  |
|  | Have you provided all relevant information correctly and to the best of your knowledge to allow Mediation Institute to evaluate your application? |
|  | Do you authorise Mediation Institute to seek information from any party noted on your application and/or supporting documents to evaluate your application? |
| **FDR Practitioners only:** *By authorising Mediation Institute to act as your independent complaint handling service you authorise Mi to notify the Attorney Generals Department if a substantiated complaint is made against you which requires disciplinary action and/or to notify them of other changes that may affect your registration as a FDR Practitioner. We will advise you by email using the email address you have provided prior to a notification to the Attorney Generals Department.*  |
|  | Do you agree that Mediation Institute may share information with the Mediators Standards Board and / or other Recognised Mediator Accreditation Bodies (RMABs) to evaluate this application and if successful to add your details to the register of NMAS Mediators or as necessary to undertake our role as an RMAB? <http://msb.org.au/mediators> |

# Have you met the Renewal Requirements?

You must confirm that you meet the Accreditation Renewal Requirements set out in clause 3 of the NMAS.

**NMAS Mediators -** Please select to indicate practice experience over the past two years.

|  |  |
| --- | --- |
|  | **Practice Requirement 3.2.** I have conducted at least 25 hours of mediation, co-mediation, family dispute resolution or conciliation in the past 24 month. *Please provide details below.*  |
|   | **Practice Requirement 3.3**. I have conducted at least 10 hours of mediation, co-mediation, family dispute resolution or conciliation in the past 24 months. *Please provide details below.*  |
|  | I have not conducted any mediation, co-mediation, family dispute resolution or conciliation in the past 24 months.  |
|  Details *e.g. what form of dispute resolution you provided, what context e.g. employer and estimated hours. More information may be required.*  |

 If you have not met Practice Requirements 3.2 you will be required to undertake the NMAS Assessment Program (current cost $990) [NMAS Assessment Program (mediationinstitute.edu.au)](https://www.mediationinstitute.edu.au/product/nmas-assessment-program/)

# Professional Development Requirements – NMAS

A mediator must undertake CPD of at least 25 hours that contributes to the knowledge, skills and ethical principles contained in the NMAS Practice Standards. Please indicate the relevant CPD you have completed in the preceding 24 months

|  |  |
| --- | --- |
| **Name:**  | **Preceding 24 month period** **From: To:**  |
| **Hours** | **Max** | **Categories** | **Provide a brief overview of the type of activity** |
|  | 20 hours | **Participating in Education:** *formal, structured activities e.g conferences, courses, seminars, and workshops.* |  |
|  | 15 hours | **Reflecting on Practice:** *professional supervision, coaching or structured peer- based reflection on cases.* |  |
|  | 15 hours | **Providing professional development:** *delivering presentations on mediation or related topics (2 hours prep for every 1 hour presentation) or providing professional supervision, assessment, coaching or mentoring trainees and/or practitioners.* |  |
|  | 10 hours | **Credit for related CPD:** *CPD in other disciplines such as law, behaviour or social sciences or other profession relevant to your professional roles e.g building or engineering.* |  |
|  | 8 hours | **Learning from practice:** *participating in up to 4 mediations as a client representative / support person, as a trainee in a formal learning capacity or role playing for trainees in leaning or assessment activities (Max. 2 hours per mediation or other simulation)* |  |
|  | 5 hours | **Self-directed learning:** *private reading, listening to podcasts, watching videos, writing blog posts, articles, or books relevant to mediation or your other roles.* |  |
|  | 5 hours | **Other –** *provide details of other**activities you believe are relevant professional development.*  |  |
|  | **Total** *25 hours min.* If you have not met the requirements you must participate in supplementary professional development before your re-instatement application can be finalised. Please contact us to discuss. Call 1300 781 533 or email office@mediationinstitute.edu.au |

# Insurance

## You must have Professional Indemnity Insurance before your application is finalised. If you hold private insurance, please provide a copy of your Certificate of Currency.

|  |  |
| --- | --- |
|   | I have Professional Indemnity Insurance  |
| *Name of insurer* | *Renewal date* |
|  | I have insurance or statutory immunity through my employer  |
| N*ame of organisation*  |

**Professional Indemnity Insurance:** All Solutions Insurance can write a policy usually less than $350 depending on your state and the level of cover you need.
Contact Dani Grahame on danielle@allsolutionsis.com.au 0447 135 151 or
Samantha Bridges samantha@allsolutionsis.com.au for a quote. (Current Jan 2022)

*Insurances services are provided for the convenience of members. Mi receives no benefit or commissions. For Policy Wording and Disclosure please refer to All Solutions Insurance*

## Membership Included

1. **NMAS Accreditation** – Mediation Institute updates the NMAS Register for 2 more years once your renewal has been processed
2. **Complaint Handling -** Membership includes access to our independent complaint handling service for NMAS Mediators, Family Dispute Resolution Practitioners and Family Group Conference Facilitators. <https://www.mediationinstitute.edu.au/complaint-handling-service/>
3. **Professional Supervision / Collegiate Support –** you can call the office for a second opinion, purchase a mentoring session, or join in a group discussion with other members
4. **Professional Development –** membership includes free ongoing professional development opportunities. https://www.mediationinstitute.edu.au/events/
5. **Shared Learning and Community –** members can access to the Mediation Institute member community and shared learning. https://mi.study247.online and members only Facebook group <https://www.facebook.com/groups/mi.member>
6. **Mediation Institute Member Directory** listing - free for all members <https://www.mediationinstitute.edu.au/mi-members/> and Mediation Institute Members Map – [Mi Members Google Map](https://www.google.com/maps/d/viewer?mid=1xsDbQJTV-ZQqdf2YkCAcAiL_Rnw-4SAo&ouid=0&ll=-30.74996350878028%2C134.6619959&z=5)
7. **Member discounts and special offers** - https://www.mediationinstitute.edu.au/member-benefits/
8. **An Invitation to volunteer** and potentially become a contractor with Interact Online Dispute Diagnostic and Dispute Resolution Service [www.interact.support/working-with-interact-support](http://www.interact.support/working-with-interact-support)

# Other Membership Categories

### Please review the table below and supply the necessary information if you would like to be recognised in any of these categories. *It does not affect your membership fee to be recognised in more than one membership category.*

You can include membership under the following categories at no extra cost. If you did not train with Mediation Institute evidence of your qualification or registration is required.

|  |  |  |
| --- | --- | --- |
| **Tick below** | **Practitioner Categories**  | **More Information** |
| **FDRP** |  | I am applying for accreditation as a Family Dispute Resolution Practitioner or pending reinstatement of my registration.     | Attached Course Certificate from:   |
|  | I am a Family Dispute Resolution Practitioner    | My Registration Number is:  |
| **FGC** |  | I am a Family Group Conference Facilitator  | Attached Course Certificate from:   |
| **CI P** |  | I am a Child Inclusive Practitioner | Attached Course Certificate from: |
| **TRM** |  | Transformative Relationship Mediation | Attached Course Certificate from:  |
| **Other**  |  | Other ADR professional role e.g., Conciliator, Divorce or Conflict Coach, Arbitrator, Parenting Coordinator etc | Evidence of your role qualifications:  |

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