## Personal Details

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

## Fill out the section below only if you are transferring to Mediation Institute

If you are transferring from another Recognised Mediator Accreditation Body (RMAB) to Mediation Institute, please provide the following information.

|  |  |
| --- | --- |
| Name of your current RMAB |  |
| Date you were first Accredited  (if known) |  |
| Renewal Date |  |
| Were any special conditions imposed on you by that RMAB? |  |

## Requirements for Renewal of NMAS Accreditation.

## Insurance

## You must have Professional Indemnity Insurance, either through your professional practice, employer or statutory immunity through your employer. A minimum cover policy is sufficient. We also recommend that you add public liability cover to your policy. You must notify Mediation Institute if your insurance coverage changes.

**Professional Indemnity Insurance:** All Solutions Insurance can write a policy usually for less than $350 depending on your state or territory and the level of cover you need.   
Contact Dani Grahame on [danielle@allsolutionsis.com.au](mailto:danielle@allsolutionsis.com.au) 0447 135 151 or   
Samantha Bridges [samantha@allsolutionsis.com.au](mailto:samantha@allsolutionsis.com.au) 0437 712 753 for a quote.

*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.*

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

## Practice Hours - please select to indicate practice experience over the past two years.

|  |  |
| --- | --- |
|  | Have you conducted at least 25 hours of mediation, co-mediation, family dispute resolution or conciliation since your last accreditation renewal?  *If no, see below. If yes go to Page 3.* |
|  | Have you conducted at least 10 hours of mediation, co-mediation, family dispute resolution or conciliation since your last accreditation renewal? |
| If you have undertaken more than 10 hours and less than 25 hours a re-assessment for competence may be required.  <https://www.mediationinstitute.edu.au/product/nmas-mediator-accreditation-assessment/> | |
| If you have undertaken less than 10 hours of mediation you will have to undertake our refresher course and assessment for competence.  <https://www.mediationinstitute.edu.au/product/nmas-assessment-program/> | |

# Professional Development Requirements - NMAS

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name:** | | | **Accreditation Period**  **From: To:** | |
| **Hours** | **Max** | **Categories** | | **Attach records or 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.* | |  |
|  |  | **Other –** *provide details of other**activities you believe are relevant professional development.* | |  |
|  | **Total** *25 hours min.* If you have not completed your 25 hours of professional development, you must do so before your renewal can be accepted. Please contact us to discuss. Call 1300 781 533 or email [office@mediationinstitute.edu.au](mailto:office@mediationinstitute.edu.au) | | | |

# NMAS Mediator Declarations

# Please tick and provide details below of any NEW issues that have arisen. You do not have to disclose anything that has previously been disclosed and accepted on a previous membership application.

# I have NOT been disqualified from professional practice since my last renewal. *Provide the details below if you have been disqualified.*

# I have NOT had any criminal convictions since my last renewal. *Provide the details below if you have had any criminal convictions*.

# I do NOT have any other issues to disclose regarding my capacity to discharge my obligations as a NMAS Mediator. *Provide the details below if you have anything to disclose.*

My NMAS Accreditation or FDRP registration is currently suspended. *Provide the details regarding the suspension and any conditions imposed below.*

Details

|  |
| --- |
|  |

I returning to NMAS Accreditation following a Leave of Absence.

|  |  |  |  |
| --- | --- | --- | --- |
| Start date for Leave of Absence |  | End Date for Leave of Absence |  |
| Duration of leave of Absence |  |  |  |

## Member Obligations

I have read and agree to comply with:

* the National Mediator Accreditation System [https://msb.org.au/...national-mediator-accreditation-system.pdf](https://msb.org.au/themes/msb/assets/documents/national-mediator-accreditation-system.pdf) and
* the Mediation Institute Ethical Standards [https://www.mediationinstitute.edu.au/...Mediation-Institute-Ethical-Standards.pdf](https://www.mediationinstitute.edu.au/wp-content/uploads/2019/03/Mediation-Institute-Ethical-Standards-2019.pdf)

I comply with any other relevant legislation, professional standards or other requirements that apply to ALL professional roles I undertake.

**Privacy Statement**

Mediation Institute will use the information provided to administer your membership and NMAS Mediator Accreditation including providing information for the [National Register of Mediators](https://msb.org.au/mediators) maintained by the Mediator Standards Board (MSB) and regarding any Leave of Absence granted or Suspension of Membership imposed.

***FDR Practitioner Members only*** - By authorising Mediation Institute to act as your independent complaint handling service you authorise us 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 for your membership prior to a notification to the Attorney Generals Department.

# Membership Categories

### Please review the listing below to confirm your membership categories. Select all that apply.

NMAS Accredited Mediator through Mediation Institute

NMAS Accredited Mediator transferring to Mediation Institute.   
  
Please make sure you complete the information on page one if you are transferring.

If you are keeping your NMAS Accreditation with another RMAB this is the wrong form. Please apply for Practitioner Membership only. <https://www.mediationinstitute.edu.au/join-mediation-institute/>

**Family Dispute Resolution Practitioner Membership (if relevant)**

### FDR Practitioner My Registration Number is:

### Mediation Institute is my complaint handling body or

Another organisation is my complaint handling body.   
Specify the name of your complaint handling body:

*If you are applying for FDR Practitioner registration, please provide a copy of your Grad. Dip. FDR or core units equivalent qualification. Your membership certificate will indicate you are “pending registration” until you provide a copy of your registration number. You will not be listed on our website or map as a FDR practitioner until you provide your registration number.*

**Family Group Conference Facilitator Membership (if relevant)**

Family Group Conference Facilitator – Mediation Institute is my complaint handling body.

Family Group Conference Facilitator – specify complaint handling body:

*If you are applying for FGC membership, please provide a copy of your certificate.*

**Payment Link**

Please click on the link below to pay by credit card or request an invoice for your membership.

$360 for two years.   
<https://www.mediationinstitute.edu.au/product/renewal-nmas-mediator-membership-with-nmas-accreditation/>

Please email [office@mediationinstitute.edu.au](mailto:office@mediationinstitute.edu.au) or call 1300 781 533 if you need any assistance.

**Transfer of NMAS Accreditation Only** - If you are currently a Practitioner Member with Mediation Institute and are transferring your NMAS Accreditation to Mediation Institute as your Recognised Mediator Accreditation Body (RMAB) your new membership will be for 24 months from your NMAS Renewal Date. The cost will be $100 plus a pro-rata of the remaining months of practitioner membership you hold which would have cost you $260 for 24 months.

## Membership Includes

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 [https://network.mediationinstitute.edu.au](https://network.mediationinstitute.edu.au/)
6. **Document Repository and Resources –** members can join in student role plays and locate resources.  <https://mi.study247.online>
7. **Discounted Mediation Institute access to The Dispute Resolution Agency Directory –** [**www.disputeresolutionagency.com**](http://www.disputeresolutionagency.com)
8. **An Invitation to volunteer** with the Interact Dispute Resolution Agency <https://icdrs.interact.support>

**How would you like us to promote you?**

**Not a private practitioner or have special privacy requirements?**

|  |  |
| --- | --- |
|  | It is important that my **contact details** are NOT listed on a public map or website. Please provide clear instructions below. |
|  | |

We maintain a public register and map of members with phone, email, social media and website links for those members who would like that level of visibility.

What would you like?

|  |  |
| --- | --- |
| **Y/N** | **Do you want us to promote your Professional Practice in the following ways?** |
|  | I would like the discount code for reduced rate access to **The Dispute Resolution Agency** – a one stop location to locate Dispute Resolution Professionals of all types.  [www.disputeresolutionagency.com](http://www.disputeresolutionagency.com) |
|  | I would like a profile on the **Mediation Institute website**. You can view our members page here <https://www.mediationinstitute.edu.au/mi-members/>  Your profile on our website will contain the following information:   * **Your name** * **Your dispute resolution qualifications** (based on this application) * **Suburb** – Please provide the suburb you would like us to use * **State** |
|  | If you would like a link to your website or social media pages paste the links below |
|  | I would like to be recognised on the **Mediation Institute Monthly Newsletter** in the new and renewing member’s section. The following information is displayed:   * **Name** * **Membership type** * **State**   Here is an example:  Joanne Law – NMAS Mediator, FDR Practitioner and FGC Facilitator – VIC |
|  | I would like to be on the **Mediation Institute Google Map**.   Click this link to view our map [https://www.google.com/maps/mediation institute members](https://www.google.com/maps/d/u/0/edit?mid=1xsDbQJTV-ZQqdf2YkCAcAiL_Rnw-4SAo&usp=sharing)  Please provide below the information you would like:   * **Name:** * **Your dispute resolution qualifications:**   If you don’t want to use your home city or town   * **Suburb:** * **Postcode:** * **State:** * **Contact Number**: this is visibly seen. If that is OK Please provide the contact number you would like to use: * **LinkedIn** profile as listed above |
|  |  |