

CIVIL MEDIATOR REGISTER APPLICATION

INFORMATION

- Name: _____
- Address: _____

- Telephone No. Office: () _____
 Fax: () _____
 Home: () _____
 Email: _____

- Educational Background:

- Current Occupation:
- LSBA Bar No. (If Attorney):

- Employment Experience:

- Civil Mediation Experience:
 I have participated in _____ mediations *as a mediator*.
 Types of Cases:

- Professional Activities:

- Fee Schedule:

CIVIL MEDIATOR QUALIFICATIONS (LA. R.S. 9:4106 (A) (1) (2))

_____ I have been licensed to practice law for 5 years or more and have completed a minimum of 40 classroom hours of training in a mediation course(s) approved by the Louisiana State Bar Association Mandatory Continuing Legal Education Committee or the Louisiana State Bar Association ADR Section. [Please furnish details below of your qualifications under La. R.S. 9:4106 (A) (1), including mediation training providers, place and date of training, and number of CLE hours earned. Please attach a certificate of completion of mediation training or a letter of completion from the provider.]

OR

_____ I have been licensed to practice law for less than 5 years and I have completed a minimum of 40 classroom hours of training in a mediation course(s) approved by the Louisiana State Bar Association Mandatory Continuing Legal Education Committee or the Louisiana State Bar Association ADR Section and I have mediated more than 25 disputes or engaged in more than 500 hours of dispute resolutions. [Please furnish details below of your qualifications under La. R.S. 9:4106 (A) (1), including mediation training providers, place and date of training, and number of CLE hours earned. Please attach a certificate of completion of mediation training or a letter of completion from the provider. Please furnish below details regarding the 25 disputes that you have mediated or a complete description of your involvement in 500 hours of dispute resolutions.]

OR

_____ I am not licensed to practice law. I have completed a minimum of 40 classroom hours of training in a mediation course(s) approved by the Louisiana State Bar Association Mandatory Continuing Legal Education Committee or the Louisiana State Bar Association ADR Section and I have mediated more than 25 disputes or engaged in more than 500 hours of dispute resolutions. [Please furnish details below of your qualifications under La. R.S. 9:4106 (A) (1), including mediation training providers, place and date of training, and number of CLE hours earned. Please attach a certificate of completion of mediation training or a letter of completion from the provider. Please furnish below details regarding the 25 disputes that you have mediated or a complete description of your involvement in 500 hours of dispute resolutions.]

OR

_____ I have served as a Louisiana district, appellate, or supreme court judge for at least 10 years and am no longer serving as a judge.

DETAILS OF QUALIFICATIONS UNDER LA. R.S. 9:4106 (A) (1) (2)

FEES FOR INCLUSION IN THE REGISTRY ARE \$100 THE FIRST YEAR AND \$50 EVERY TWO YEARS THEREAFTER. RENEWAL NOTICES ARE SENT EVERY TWO YEARS TO ALL LISTED MEDIATORS. CHECKS SHOULD BE MADE OUT TO 'LSBA-ADR SECTION' AND MAILED WITH THIS APPLICATION AND PROOF OF QUALIFICATIONS AND HOURS TO THE ADDRESS BELOW: Christine A. Richard LA Mediator Registry phone: 504-619-0105 toll-free: 1-800-421-5722 email: crichard@lsba.org 601 St. Charles Avenue, New Orleans, LA 70130

I certify that the information contained in this application is accurate.

SIGNATURE

date