

**BALTIMORE FEDERAL EXECUTIVE BOARD MEDIATION SERVICES PROGRAM**

**CO-MEDIATOR PROFILE**

*This form is designed for use by individuals who have completed an initial dispute resolution course and have limited mediation experience.*

Name: \_\_\_\_\_ Position \_\_\_\_\_

Federal Agency, Component: \_\_\_\_\_

Work Address: \_\_\_\_\_

Phone number: \_\_\_\_\_ Fax: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Supervisor's Name and Phone Number: \_\_\_\_\_

**Dispute Resolution Training and Experience:** documentation required (see p. 2)

Types of courses completed, trainer/organization, length of class (days/hours):

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Number of mediating/co-mediating conducted; experience with other ADR processes (e.g., early neutral evaluation, interest-based negotiation):

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**Related Experience and Skills:**

Other relevant experience (e.g., education, work or job related, volunteer):

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Other skills that could aid you in a mediated/facilitated process (e.g., foreign language, sign language):

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**Documentation** (required for registration)

1. Attach evidence of ADR training, including a minimum of 40 hours in basic mediation skills, and document any mediations completed either independently or with a mentor mediator.
2. Attach two letters of recommendation. Letters should address communication skills and ability to work with others. The writer's contact information should also be included.

**Certification**

**I hereby certify that the information provided in this form or annexed hereto is true to the best of my knowledge and accurately reflects my qualifications to serve as a mediator for the Baltimore Federal Executive Board's, Mediation Services Program (MSP).**

**I agree that acceptance of assignments through MSP will not interfere with my regular job responsibilities and that I will keep my supervisor informed of my dispute resolution work.**

**I agree to follow MSP Procedure, including keeping them informed of my availability, advising them of the status of cases mediated, and assuring that evaluation forms and case closing forms are completed.**

**I agree to keep my conflict resolution skills updated.**

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**Furthermore, I hereby agree that if any problem arises related to my involvement as a neutral or any representations I have made related to this program, it shall be resolved by the MSP administrators, whose determination shall be final on all matters.**

**I have read the MSP Standards of Practice and agree to abide by all such Rules.**

\_\_\_\_\_  
**Signature of Applicant**

\_\_\_\_\_  
**Date**