STATE OF NORTH CAROLINA	APPLICATION FOR CERTIFICATION TO CONDUCT SUPERIOR COURT MEDIATIONS G.S. 7A-38.1; Rules for Mediated Settlement Conferences and Other Settlement Procedures in Superior Court Civil Actions

Name And Address Of Applicant	*Date Of Birth*	*Email Address*
	Telephone No.	*Fax No.*

INSTRUCTIONS: *Attorney applicants licensed in North Carolina complete Section I. Other attorney applicants complete Section II. Non-attorney applicants complete Section III. All applicants must complete the remaining sections. Please type or print and mail this form with the required attachments to the NC Dispute Resolution Commission, PO Box 2448, Raleigh, NC 27602. Please enclose a check for your prorated certification fee made payable to the NC Dispute Resolution Commission.* ***Effective February 28, 2025, the NCDRC will charge a $200.00 application certification fee.*** *The Commission reserves the right to request additional information from applicants as needed to process their applications.*

I apply for certification as a mediator to conduct mediated settlement conferences in superior court pursuant to G.S. 7A-38.1 and the Rules for Mediated Settlement Conferences and Other Settlement Procedures in Superior Court Civil Actions.

SECTION I. REQUIREMENTS FOR CERTIFICATION OF ATTORNEYS LICENSED IN NC

Complete this section only if you are an attorney licensed in North Carolina applying for certification to conduct mediated settlement conferences.

1. **BAR ADMISSION**

I am a member in good standing of the North Carolina State Bar. Rule 8(a)(2)(a)(1).

Date Of Admission	*North Carolina Bar No.*

I ☐ am ☐ am not currently suspended or disbarred from the practice of law by the attorney licensing authority of any state. Rule 8(a)(2).

I ☐ have ☐ have not been forced to forfeit my license to practice law in any state. Rule 8(a)(2).

2. **WORK EXPERIENCE**

I have at least five years of experience after date of licensure as a judge, practicing attorney, law professor and/or mediator, or equivalent experience.

	Dates	Jurisdiction/Address	Briefly Describe Experience
☐ **Judge**			
☐ **Practicing Attorney**			
☐ **Law Professor**			
☐ **Mediator**			
☐ **Other**			

3. **TRAINING** (Complete only subsection (a) or subsection (b) below.)

(a) I have completed at least forty (40) hours of trial court mediation training in a program certified by the NC Dispute Resolution Commission. Rule 8(a)(1). *(Attach a copy of your certificate of training.)*

Program Title	*Date Of Training*	*Training Conducted By*

NOTE: *If the program you attended has not been certified by the NC Dispute Resolution Commission, please submit copies of the agenda, trainer resumes, and all course materials.*

(b) I am currently certified by the NC Dispute Resolution Commission to conduct family financial mediations in North Carolina and I have completed a 16-hour supplemental trial court mediation training program certified by the NC Dispute Resolution Commission. Rule 8(a)(1). *(Attach a copy of your certificate of training.)*

Program Title	*Date Of Training*	*Training Conducted By*

SECTION II. REQUIREMENTS FOR CERTIFICATION OF ATTORNEYS LICENSED IN OTHER STATES

Complete this section only if you are a licensed attorney not admitted in North Carolina applying for certification to conduct mediated settlement conferences.

1. **LEGAL EDUCATION AND BAR ADMISSION**

I am a graduate of the following law school: Rule 8(a)(2)(a)(2).

Name Of Law School	*Location Of Law School*	*Year Graduated*

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I am a member in good standing of the Bar of the following state: Rule 8(a)(2)(a)(2).

Date of Admission	*State*	*Bar No.*

I ☐ am ☐ am not currently suspended or disbarred from the practice of law by the attorney licensing authority of any state. Rule 8(a)(2).

I ☐ have ☐ have not been forced to forfeit my license to practice law in any state. Rule 8(a)(2).

2. **WORK EXPERIENCE**
I have at least five (5) years of experience after date of licensure as a judge, practicing attorney, law professor and/or mediator, or equivalent experience. Rule 8(a)(2)(a)(3). Following is the experience I wish to have considered:

	Dates	**State/Jurisdiction/Address**	**Briefly Describe Experience**
☐ **Judge**			
☐ **Practicing Attorney**			
☐ **Law Professor**			
☐ **Mediator**			
☐ **Other**			

3. **TRAINING** (Complete only subsection (a) or subsection (b) below.)

(a) I have completed at least forty (40) hours of trial court mediation training in a program certified by the NC Dispute Resolution Commission. Rule 8(a)(1). *(Attach a copy of your certificate of training.)*

Program Title	*Date Of Training*	*Training Conducted By*

NOTE: *If the program you attended has not been certified by the NC Dispute Resolution Commission, please submit copies of the program agenda, trainer resumes, and all course materials.*

(b) I am currently certified by the NC Dispute Resolution Commission to conduct family financial mediations in North Carolina and I have completed a 16-hour supplemental trial court mediation training program certified by the NC Dispute Resolution Commission. Rule 8(a)(1). *(Attach a copy of your certificate of training.)*

Program Title	*Date Of Training*	*Training Conducted By*

☐ (c) I have attached to my application a letter signed by me reciting efforts I have made to familiarize myself with North Carolina court structure, legal terminology, and civil court procedure. Rule 8(a)(2)(a)(2). The Commission reserves the right to request additional information.

4. **LETTERS OF REFERENCE**

☐ I have attached to my application three (3) letters of reference attesting to my good character, including at least one letter from a person with knowledge of my practice as an attorney. Rule 8(a)(2)(a)(2).

SECTION III. REQUIREMENTS FOR CERTIFICATION OF NON-ATTORNEYS

Complete this section only if you are a non-attorney applying for certification to conduct mediated settlement conferences.
NOTE: ***Complete only subsection 1 or subsection 2 below. (All non-attorney applicants must complete subsections 3, 4, 5 and 6.)***

1. **TRAINING, EDUCATION AND EXPERIENCE**

(a) I have completed twenty (20) hours of basic mediation training provided by a trainer acceptable to the NC Dispute Resolution Commission. Rule 8(a)(2)(b)(3).

Program Title	*Name Of Trainer*	*Sponsoring Organization*	*Date*

NOTE: *If you cannot provide exact information on this course, provide approximate information. If you have the agenda or a certificate evidencing your participation, please attach a copy. The Commission reserves the right to make further inquiry about the course.*

(b) After completing the 20-hour training above, I have mediated at least thirty (30) disputes over the course of at least three (3) years, or equivalent experience. Rule 8(a)(2)(b)(3).

Year	**No. Of Cases Mediated**	*Practice, Office Or Agency For Which You Conducted The Mediations:*

NOTE: *If you have experience equivalent to mediation experience, please set forth your equivalent experience in a letter attached to this Application. The Commission reserves the right to request additional information about your mediation or equivalent experience.*

☐ (c) I possess a four-year degree from an accredited college or university. Rule 8(a)(2)(b)(3). *(Attach a copy of your diploma or certified transcript.)*

☐ (d) I possess at least four (4) years of professional, management or administrative experience in a professional, business or governmental entity. Rule 8(a)(2)(b)(3). *(Attach a copy of a resume or a letter highlighting the experience you wish considered. The Commission reserves the right to request additional information about your experience.)*

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You need not complete subsection 2 if you completed subsection 1 above.

2. **EDUCATION AND EXPERIENCE**

☐ (a) I possess a four-year degree from an accredited college or university. Rule 8(a)(2)(b)(3). *(Attach a copy of your diploma or certified transcript).*

☐ (b) I possess at least ten (10) years of professional, management or administrative experience in a professional, business or governmental entity. Rule 8(a)(2)(b)(3). Please attach a copy of a resume or letter highlighting the experience you wish the Commission to consider. The Commission reserves the right to request additional information about your work experience.

☐ (c) I possess a master's degree or doctoral degree in alternative dispute resolution studies and I possess at least five (5) years of high or relatively high level professional or management experience of an executive nature in a professional, business, or governmental entity. Rule 8(a)(2)(b)(3). Please attach a copy of a resume or letter highlighting the experience you wish the Commission to consider. The Commission reserves the right to request additional information about your work experience.

3. **OBSERVATIONS**

These observations must be completed in addition to the two (2) observations required by Rule 8(a)(3)(b). (Section IV below).
[Attach a copy of your certificates of observation signed by the mediators.]

Date Of Observation	County Where Case Observed Was Filed	Name Of Mediator	Case/File No. Of Case Observed

NOTE: ***Mediations must be conducted by at least two different mediators.*** *At least one of these mediations must be of a Superior Court case; the others may be of cases pending before and ordered into mediation by the North Carolina Industrial Commission, the North Carolina Office of Administrative Hearings, a North Carolina Superior Court, the North Carolina Court of Appeals, the U.S. District Courts for North Carolina, or the NC Department of Labor. Disputes mediated prior to litigation upon agreement of the parties shall be eligible for observations. Each mediation must be observed from beginning through settlement or impasse.*

4. **SUPERIOR COURT TRAINING** (Complete only subsection (a) **or** subsection (b) below.)

(a) I attended and completed at least forty (40) hours of trial court mediation training in a program certified by the NC Dispute Resolution Commission. Rule 8(a)(1). *(Attach a copy of your certificate of training.)*

Program Title	*Date Of Training*	*Training Conducted By*

NOTE: *If the program you attended has not been certified by the Commission, please submit copies of the program agenda, trainer resumes, and all course materials. If the training you took was conducted online or partially online, you must notify the Commission's office.*

(b) I am currently certified by the NC Dispute Resolution Commission to conduct family financial mediations in North Carolina and have completed a 16-hour supplemental trial court mediation training program certified by the NC Dispute Resolution Commission. Rule 8(a)(1). *(Attach a copy of your certificate of training.)*

Program Title	*Date Of Training*	*Training Conducted By*

☐ (c) I attended and completed at least six (6) hours of training on North Carolina court organization, legal terminology, civil court procedure, the attorney-client privilege, the unauthorized practice of law and common legal issues arising in Superior Court, conducted by a trainer certified by the Commission. Rule 8(a)(2)(b)(1). *(Attach a copy of your certificate of training or a letter from your trainer.)*

☐ 5. **LETTERS OF REFERENCE**

I have attached to this application three (3) letters of reference attesting to my good character, including at least one (1) letter from a person with knowledge of my experience claimed in Rule 8(a)(2)(b)(3). Rule 8(a)(2)(b)(2).

6. **PROFESSIONAL STANDING**

(a) If you are a professional, are you currently a member in good standing of your profession? Rule 8(a)(5).
☐ Yes ☐ No ☐ Not Applicable *(If no, please explain.)*

_____

(b) Has your license to practice your profession ever been suspended or revoked or have you been asked to forfeit it? Rule 8(a)(5).
☐ Yes ☐ No ☐ Not Applicable *(If yes, please explain.)*

_____

(c) Have you been disbarred by an attorney licensing authority in any state? Rule 8(a)(5).
☐ Yes ☐ No ☐ Not Applicable *(If yes, please explain.)*

_____

(Over)

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SECTION IV. OBSERVATIONS - TO BE COMPLETED BY ALL APPLICANTS

(All applicants must complete this section.)

OBSERVATIONS

I have observed two (2) mediated settlement conferences conducted by a mediator(s) certified in North Carolina, at least one (1) of which was a North Carolina Superior Court case. Rule 8(a)(3)(a). *(Attach a copy of your certificates of observation signed by the mediator(s).)*

Date Of Observation	County Where Case Observed Was Filed	Name Of Mediator	Case/File No. Of Case Observed

NOTE: *At least one (1) of these mediations must be of a North Carolina Superior Court case; the others may be of cases pending before and ordered into mediation by the North Carolina Industrial Commission, the North Carolina Office of Administrative Hearings, a North Carolina Superior Court, the North Carolina Court of Appeals, the U.S. District Courts for North Carolina, or the NC Department of Labor. Disputes mediated prior to litigation upon agreement of the parties shall be eligible for observations. Each mediation shall be observed from beginning through impasse or settlement.*

SECTION V. FARM MEDIATION - TO BE COMPLETED BY ALL APPLICANTS

(All applicants must complete this section)

1. **PRE-LITIGATION FARM NUISANCE MEDIATION PROGRAM**

   I ☐ am ☐ am not willing to be appointed or selected to conduct farm mediations pursuant to G.S. 7A-38.3.

   NOTE: *Copies of forms and rules for this program are available online or through the Commission's Office.*

SECTION VI. AVAILABILITY - TO BE COMPLETED BY ALL APPLICANTS

(All applicants must complete this section)

1. **INDICATE JUDICIAL DISTRICTS IN WHICH YOU WISH TO MEDIATE UPON PARTY SELECTION IN SUPERIOR COURT CIVIL ACTIONS:**

   ☐ All Judicial Districts

   ☐ Select Judicial Districts *(Review the attached map and list districts below.)*

2. **INDICATE JUDICIAL DISTRICTS IN WHICH YOU ARE WILLING TO ACCEPT COURT APPOINTMENTS TO MEDIATE SUPERIOR COURT CIVIL ACTIONS:***

   ☐ Select Judicial Districts *(Review the attached map and list districts below.)*

*The Commission will notify the above listed judicial districts of your interest in receiving court appointments. However, mediators should contact districts they have specified directly to learn of any local rules or policies relating to appointment of mediators and to verify their eligibility to receive court appointments. Contact information for local staff is available through this office. The NCAOC has posted local rules for some judicial districts on its website at www.nccourts.gov.

SECTION VII. CLERK MEDIATION PROGRAM - TO BE COMPLETED BY ALL APPLICANTS

(All applicants must complete this section)

1. **CLERK MEDIATION PROGRAM PARTICIPATION:**

   I ☐ am ☐ am not willing to conduct clerk program mediations pursuant to G.S. 7A-38.3B excluding mediations of guardianship and estate matters.

   NOTE: *If you are willing to participate, you will be forwarded information about accessing rules and forms.*

2. **AVAILABILITY** *(To be completed only by those mediators willing to participate in the Clerk Mediation Program.)*

   a. **INDICATE COUNTIES IN WHICH YOU WISH TO CONDUCT MEDIATIONS UPON PARTY SELECTION EXCLUDING MEDIATIONS OF GUARDIANSHIP AND ESTATE MATTERS.**

      ☐ All Counties

      ☐ Selected Counties *(Review the attached map and list counties below.)*

   b. **INDICATE COUNTIES IN WHICH YOU WISH TO CONDUCT MEDIATIONS UPON CLERK APPOINTMENT EXCLUDING MEDIATIONS OF GUARDIANSHIP AND ESTATE MATTERS.***

      ☐ Selected Counties *(Review the attached map and list counties below.)*

*The Commission will notify the Clerks in the above listed counties of your interest in receiving appointments. However, mediators should contact counties they have specified directly to learn of any local requirements relating to appointment of mediators and to verify their eligibility to receive Clerk appointments. Contact information for local Clerk staff is available through the Commission's office.

☐ 3. Please check here to receive a certification application packet to conduct mediations of guardianship and estate matters referred by Clerks of Superior Court.

(Over)

SECTION VIII. CHARACTER

(All applicants must complete this section)

1. **AUTHORIZATION AND RELEASE**

☐ (a) **ATTORNEY/JUDGE APPLICANTS:** I hereby authorize and request that the North Carolina State Bar, North Carolina Judicial Standards Commission, and/or the disciplinary agency of any other state in which I am licensed or have been licensed to practice law or have served as a member of the judiciary, provide to the NC Dispute Resolution Commission information on all complaints filed against me, including but not limited to those administratively dismissed and those resulting in non-public discipline. In addition, I authorize any judge who has sanctioned me to provide the Commission with information about the circumstances surrounding the sanction.

Applicant's North Carolina State Bar ID No. _____

If licensed to practice law in other states, complete the following:

State	Name Of Disciplinary Agency	Address	Telephone No.	Attorney's ID No.

☐ (b) **NON-ATTORNEY APPLICANTS:** I hereby authorize the licensing/certification or disciplinary agency(ies) listed below to provide to the North Carolina Dispute Resolution Commission information regarding the status of my license/certification and all complaints filed against me, including but not limited to those administratively dismissed or resulting in non-public discipline.

North Carolina Professional License/Certification No. _____

List name, address and telephone number of the North Carolina licensing/certifying agency:

_____

If licensed/certified as a professional in other states, complete the following:

State	Name Of Disciplinary Agency	Address	Telephone No.	Applicant's ID No.

☐ (c) **ALL APPLICANTS WHO HAVE SERVED AS A NEUTRAL IN OTHER STATES:** I hereby authorize any entity responsible for qualifying and regulating the conduct of neutrals in any state where I served as a mediator or neutral to provide to the NC Dispute Resolution Commission copies of all complaints filed against me in that state, including but not limited to those administratively dismissed or resulting in non-public discipline.

List all states in which you have served as a mediator or other neutral: _____

List agencies responsible for qualifying/disciplining mediators or other neutrals in the above states:

State	Name Of Disciplinary Agency	Address	Telephone No.

2. **REPORT OF CRIMINAL CONVICTIONS/DISCIPLINARY ACTIONS/CIVIL JUDGMENTS (Rule 8(a)(5))**

(a) Have you ever been convicted of a crime (excluding infractions)? * ☐ Yes ☐ No *(If yes, please explain.)*

_____

_____

* For purposes of this application, the term "convicted" shall mean that the applicant has experienced a determination of guilt resulting from a plea or a trial of a felony or misdemeanor, regardless of whether adjudication was withheld (PJC) or whether imposition of sentence was suspended. All convictions as an adult are to be reported whether they occurred in any state, federal, military, or foreign court.

(b) Do you have any pending criminal matters? ☐ Yes ☐ No *(If yes, please explain.)*

_____

_____

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(c) **Within ten (10) years of the date of this application:** Have you been subjected to disciplinary action by any professional/regulatory agency? Have you been sanctioned by a judge? Have you been the subject of any complaints, grievances, or other such matters filed before a professional body or before an officer of the court?
☐ Yes ☐ No *(If a grievance or other complaint has been filed against you in the last ten (10) years, please attach a copy of the grievance and your response to it. Attach a copy of any document informing you that you were reprimanded, censured or otherwise disciplined and a copy of the dismissal of any grievance or other complaint.)*

(d) Have any professional privileges held by you ever been suspended or revoked in any state at any time? Have you ever voluntarily relinquished any professional privilege or assumed inactive status in order to avoid suspension or loss of that privilege in any state at any time?
☐ Yes ☐ No *(If yes, please explain below and identify the licensing/regulatory body involved and provide contact information.)*

☐ (e) I have completed and signed form AOC-A-210, Criminal And Sex Offender Record Search, included in the application packet. *(Please return AOC-A-210 to the Commission with your completed application. **The DRC will complete the record search.**)*

(f) **Within ten (10) years of the date of this application:** Have any civil judgments been taken against you? Have any tax liens been filed against you? Have you filed for bankruptcy?
☐ Yes ☐ No *(If yes, please explain.)*

(g) Whether or not you were formally qualified, *i.e.*, certified, registered, *etc.*, have you ever been barred or suspended from serving as a mediator or as a neutral in any court, non-profit agency or other body?
☐ Yes ☐ No *(If yes, please explain.)*

☐ (h) I understand that once certified, I am required to report to the NC Dispute Resolution Commission within thirty (30) days of experiencing or being notified of: any criminal conviction(s); any disbarments(s), revocation(s) or suspension(s) of a professional license; any judicial sanction(s); any tax lien(s); any civil judgment(s); or any filing(s) for bankruptcy.

I understand that once certified, I am required to report to the NC Dispute Resolution Commission any disciplinary complaint(s) filed with or action(s) taken by any professional licensing or regulatory body no later than thirty (30) days after receiving notice of the matter or, if a response to the grievance or complaint is permitted by the professional licensing, certifying, or regulatory body, no later than thirty (30) days after the due date for the response.

CERTIFICATION AND RELEASE

I, the undersigned, certify that I have given true, accurate, and complete information on this application to the best of my knowledge. I am of good moral character; I will adhere to all ethical rules and other rules adopted by the NC Dispute Resolution Commission and all rules adopted by the Supreme Court of North Carolina for mediation of civil cases; and I agree to mediate indigent cases without pay and without charging for transportation. In signing below, I authorize any individuals, courts, regulatory or other bodies, employers, trainers, and references provided with my application and/or identified in the application or renewal process, to release information about me to the NC Dispute Resolution Commission.

SWORN/AFFIRMED AND SUBSCRIBED TO BEFORE ME		*Date*
Date	*Signature Of Person Authorized To Administer Oaths*	*Signature Of Applicant*
Title Of Person Authorized To Administer Oaths		*Name and Address of Applicant (type or print)*
☐ *Notary*	*Date My Commission Expires*	
SEAL	*County Where Notarized*	

FOR COMMISSION USE ONLY

Pursuant to G.S. 7A-38.1 and the Supreme Court of North Carolina's Rules for Mediated Settlement Conferences and Other Settlement Procedures in Superior Court Civil Actions, you are certified as a mediator to conduct trial court ordered mediated settlement conferences in superior court civil cases.

Date	*Name (type or print)*	*Signature*

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STATE OF NORTH CAROLINA

JUDICIAL BRANCH OF GOVERNMENT
Human Resources Division
PO Box 2448
Raleigh, NC 27602

CRIMINAL AND SEX OFFENDER RECORD SEARCH

NAME

Last Name	*First Name*	*Middle Name*

DRIVERS LICENSE

Drivers License No.	*State*	*Date Of Birth*

ADDRESS

If you have moved within the last seven (7) years, please complete the following information. Attach additional pages if necessary.

Current Street Address			*Dates Of Residency* *From* *To*
City	*County*	*State*	*Zip*
Previous Street Address			*Dates Of Residency* *From* *To*
City	*County*	*State*	*Zip*
Previous Street Address			*Dates Of Residency* *From* *To*
City	*County*	*State*	*Zip*
Previous Street Address			*Dates Of Residency* *From* *To*
City	*County*	*State*	*Zip*

PREVIOUS NAMES

*List **ALL** previous names used and the effective dates of each (including married, maiden and aliases). Attach additional pages if necessary.*

Last Name	*First Name*	*Middle Name*	*Effective Dates* *From* *To*
Last Name	*First Name*	*Middle Name*	*Effective Dates* *From* *To*
Last Name	*First Name*	*Middle Name*	*Effective Dates* *From* *To*

I certify that the information given is true and correct.

Date	*Signature*

SEARCH RESULTS

Results Of Criminal Record Search (ACIS/CCIS)

☐ No Record Found
☐ Following Record(s) Found

Date	*Offense*
Date	*Offense*
Date	*Offense*
Completed By	

Results Of Sex Offender Search

☐ No Record Found
☐ Following Record(s) Found

Date	*Offense*
Date	*Offense*
Date	*Offense*
Completed By	

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CERTIFICATE OF OBSERVATION

Mediated Settlement Conference Program

Rule 8(a)(3) of the Rules for Mediated Settlement Conferences and
Other Settlement Procedures in Superior Court Civil Actions

Note: All applicants for mediator certification are advised to review the Observer Conduct and Guidelines for Applicants Fulfilling Observation Requirements document and MSC Rule 8(a)(3) prior to completing their observations.*

In Person: ☐ Yes ☐ No

Pre-Litigation: ☐ Yes ☐ No

Case Caption: _____

Case/File No.: _____

I hereby certify that:

1. I am currently certified by the NC Dispute Resolution Commission as a superior court mediator.

2. On _____, I conducted a mediated settlement conference in the above matter, which was observed by
(date)

_____ from the beginning of the mediation until its conclusion by settlement or impasse.
(type or print name of observer)

_____
Signature Of Mediator

_____
Name Of Mediator (type or print)

_____
Email Address Of Mediator

This, the _____ day of _____ 20_____.

***Attorney applicants** must observe two (2) mediated settlement conferences conducted by a certified superior court mediator from beginning to impasse or settlement, at least one (1) of which must be of a superior court case. Conferences eligible for observation are those disputes mediated prior to litigation by agreement of the parties, or cases pending before the NC Superior Court, the NC Court of Appeals, the NC Industrial Commission, the NC Office of Administrative Hearings, the US District Courts for North Carolina, or the NC Department of Labor, that are ordered to mediation or conducted by agreement of the parties, and which are conducted in accordance with the rules for mediation of the applicable entity. MSC Rule 8(a)(3).

Non-attorney applicants must observe five (5) mediated settlement conferences conducted by at least two (2) different certified superior court mediators from beginning to impasse or settlement, at least two of which must be of superior court cases. Conferences eligible for observation are those disputes mediated prior to litigation by agreement of the parties, or cases pending before the NC Superior Court, the NC Court of Appeals, the NC Industrial Commission, the NC Office of Administrative Hearings, the US District Courts for North Carolina, or the NC Department of Labor, that are ordered to mediation or conducted by agreement of the parties, and which are conducted in accordance with the rules for mediation of the applicable entity. MSC Rule 8(a)(3).

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