



**Provisional Pre-Training Approval Packet
FAMILY FINANCIAL SETTLEMENT PROGRAM
(FFS Program)**

Thank you for seeking a Provisional Pre-training Approval of eligibility to be certified as a family financial mediator prior to registering for a Commission approved mediator certification training program. Provisional Pre-training Approvals are issued pursuant to the Dispute Resolution Commission Guidelines for Issuing Provisional Pre-training Approvals. FFS Rule 8(a)(2)a. and 8(a)(2)b. establish threshold education and work experience requirements for district court mediators in the family financial mediation program. By seeking a Provisional Pre-training Approval, you are asking this office to determine whether you meet the threshold criteria of FFS Rule 8(a)(2)a. and 8(a)(2)b. As part of this review, staff will conduct a background check on you.

Please feel free to contact the Commission's office if you have any questions. Thank you.

Telephone: (919) 890-1415 * Facsimile: (919) 890-1935
Mailing Address: P.O. Box 2448, Raleigh, NC 27602
Web Address: WWW.NCDRC.GOV
Email: DRCMediators@nccourts.org

DISPUTE RESOLUTION COMMISSION

Provisional Pre-training Approval Process

FFS Program

Commission staff may issue Provisional Pre-training Approvals at the request of individuals who are seeking assurances that they meet **threshold** requirements for certification relating to education and work experience as set forth in FFS Rule 8.(a)(1), prior to registering for a mediator training program. Commission staff may also issue Provisional Pre-training Approvals at the request of individuals seeking assurances that some ethical or fitness to practice concern they have experienced does not appear to serve as a bar to certification under FFS Rule 8.(a)(7).

Please be advised that the issuance of a Provisional Pre-training Approval is not a guarantee of certification. The final determination on an application for certification rests with the Commission as it is the final authority in determining an applicant's eligibility for certification.

I. FFS Program Threshold Requirements

FFS Rule 8. is posted on the Commission's Family Financial Mediator Certification page.

FFS Rule 8(a)(2)a. and 8(a)(2)b. establish the following threshold requirements for certification related to education and work experience:

- A. FFS Rule 8(a)(2)a.** An **Advanced Practitioner member** of the Association for Conflict Resolution (ACR) who holds an undergraduate degree from an accredited four-year college or university is eligible for certification.

If you are seeking a Provisional Pre-training Approval pursuant to FFS Rule 8(a)(2)a., verification of your membership as an Advanced Practitioner member of ACR, your resume, and a photocopy of your diploma or transcript, the signed release, and the completed and signed Criminal and Sex Offender Record Search.

- B. Rule 8(a)(2)b.1. Attorneys.** An attorney is eligible for certification if s/he is a member in good standing of the NC State Bar, or bar of another state and a graduate from a school recognized as accredited by the North Carolina Board of Law Examiners, with at least five years of experience after the date of licensure as a judge, practicing attorney, law professor and/or mediator or a person with equivalent experience.

If you are seeking a Provisional Pre-training Approval pursuant to FFS Rule 8(a)(2)b.1, please provide your letter or resume describing your education and work experience. Please identify the law school from which you graduated and the date of your graduation, identify all states in which you are licensed to practice and dates of licensure, and describe your work experience since licensure, including employers and the dates employed.

Pursuant to FFS Rule 8(a)(2)b.1. attorneys employed in non-traditional positions will need to provide sufficient detail regarding their employment for Commission staff to determine whether the experience is “equivalent” to the practice of law. Significant gaps in employment or frequent changes in employment should be explained. Please include the signed release and the completed and signed Criminal and Sex Offender Record Search.

C. FFS Rule 8(a)(2)b.2-7. Non-Attorneys. A non-attorney is eligible for certification if the non-attorney applicant is:

- (2) a NC licensed psychiatrist with at least five years of experience in the field after the date of licensure; or
- (3) a NC licensed psychologist with at least five years of experience in the field after the date of licensure; or
- (4) a NC licensed marriage and family therapist with at least five years of experience in the field after date of licensure; or
- (5) a NC licensed clinical social worker with at least five years of experience in the field after date of licensure; or
- (6) a NC licensed professional counselor with at least five years of experience in the field after date of licensure; or
- (7) an accountant certified in North Carolina with at least five years of experience in the field after the date of certification.

If you are seeking a Provisional Pre-training Approval pursuant to FFS Rule 8(a)(2)b.2-7., please provide a letter or resume describing your education and work experience. Please identify the professional license held and the date of licensure and describe your work experience since licensure, including employers and the dates employed. Significant gaps or frequent changes in employment should be explained. Please include the signed release and the completed and signed Criminal and Sex Offender Record Search.

II. Good Moral Character

FFS Rule 8(a)(7) requires that applicants be of good moral character.

If you are specifically seeking a Provisional Pre-training Approval pursuant to FFS Rule 8(a)(7), please provide a summary of the ethics, conduct, or fitness to practice matter that you are concerned may serve as an impediment to your certification. Please attach copies of any relevant documents, e.g., copies of any orders of discipline, copies of any tax liens, etc. You will also need to submit to a background check (see below). If you disclose serious ethical, conduct, or fitness concerns, or the background check reveals such, staff may be unable to issue a Provisional Pre-training Approval.

III. Additional requirements of the Provisional Pre-training Approval process

Staff may contact colleges, universities, licensing/regulatory authorities, employers, and others with information about your education and work experience. **Please sign and return the enclosed Release of Information form.**

Staff must establish the provisional pre-training approval applicant is of good character and fit to practice as a mediator (See FFS Rule 8(2)(7)). A routine background check will be conducted. **Please complete, sign, and return the attached Criminal and Sex Offender Record Search.**

Commission staff may contact you for clarification of or additional documentation regarding your submitted materials. Commission staff will review your materials and respond to your request for a Provisional Pre-training Approval as soon as possible.

IV. Additional Considerations

A Provisional Pre-training Approval pertains only to threshold education, work experience, and conduct requirements relating to FFS certification. To become certified, an applicant must not only comply with threshold requirements, but complete all additional requirements set forth in FFS Rule 8, including all training and observation requirements, and comply with all Commission policies interpreting those rules. The NC Dispute Resolution Commission is the final arbiter of certification and a Provisional Pre-training Approval is not a guarantee of eventual FFS mediator certification.

If, after review, it is determined that the requester does not meet the threshold requirements for certification and/or a background check of the requester reveals concerns related to good moral character, conduct, or fitness to practice, staff shall deny the request for a Provisional Pre-training Approval. Staff may seek guidance from the Chair of the Mediator Certification and Training Committee or the Chair of the Grievance and Disciplinary Committee. The chair of either committee, once consulted by staff, may at the chair's discretion, present the matter to their full committee for review. Staff shall follow the recommendation made by the chair, or full committee, as to the issuance of a Provisional Pre-training Approval for any applicant.

The staff decision to deny issuing a Provisional Pre-training Approval is a final determination and shall not be appealable. An individual whose request for a Provisional Pre-training Approval has been denied may, however, elect to take a Commission approved training course, complete the requisite requirements for certification, and file an application for certification in the program(s) in which the individual wishes to be certified.



RELEASE OF INFORMATION AUTHORIZATION

By signing below, I authorize any individuals, courts, regulatory or other bodies, educational institutions, accreditation organizations, employers, or others identified in materials submitted by me or discovered through the Provisional Pre-training Approval process to release information about me to the NC Dispute Resolution Commission for purposes of determining whether I meet the threshold requirements for mediator certification:

Signature

Printed Name

State of North Carolina
County of _____

Before me personally appeared the said _____ and acknowledged the due execution of the foregoing statement.

This _____ day of _____, 20____.

My commission expires:

SEAL/STAMP

Signature of Notary Public

Printed Name of Notary Public

February 27, 2015

**STATE OF NORTH CAROLINA
DISPUTE RESOLUTION COMMISSION**

P.O. Box 2448
Raleigh, NC 27602

CRIMINAL AND SEX OFFENDER

RECORD SEARCH

This information is requested pursuant to N.C. Gen. § 32-1.10. The DRC shall maintain the confidentiality of all information on this form. The last four digits of the SSN will be redacted from the form and all DRC records at the completion of the application or renewal process.

		NAME			
Last Name		First Name		Middle Name	
		DRIVER LICENSE			
Driver License No.		State	Last 4 digits of SSN		Date of Birth
If you have moved within the last seven (7) years please complete the following information. Attach additional pages if necessary.					
Current Address				Dates of Residency from To	
City	County		State	Zip	
Previous Address				Dates of Residency from To	
City	County		State	Zip	
Previous 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 page 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 above is true and correct.					
Date		Signature			
		TO BE COMPLETED BY COMMISSION STAFF			
Results of Criminal Record Search (ACIS/CCIS)			Results of Sex Offender Search		
<input type="checkbox"/> No Record Found <input type="checkbox"/> Following Record(s) Found			<input type="checkbox"/> No Record Found <input type="checkbox"/> Following Record(s) found		
Date	Offense		Date	Offense	
Date	Offense		Date	Offense	
Date	Offense		Date	Offense	
Completed by			Completed by		
Date			Date		