

CIRCUIT COURT OF COOK COUNTY–DOMESTIC RELATIONS DIVISION

REQUIREMENTS FOR MEDIATOR LIST

In order to be placed on and remain on the Domestic Relations Division Mediator List, applicants/mediators must be approved by the Office of the Presiding Judge of the Domestic Relations Division and shall:

1. File a complete application with the Presiding Judge of the Domestic Relations Division which shall provide proof by affidavit supported by documentation of the required qualifications, the hourly rate that the mediator will charge for mediation services, the business address where the mediation services will be provided, coverage by professional responsibility insurance that covers the mediation process, membership in good standing in the professional organization(s) of the individual's discipline, and such other information as the Presiding Judge may require.
2. Have an Illinois license as an attorney, psychologist, social worker, or marriage and family therapist. License must remain in good standing in order to remain on Mediator List. Applicants who wish to be placed on the list of certified mediators for appointment as mediator for discretionary mediation (non-child related issues) under Cook County Circuit Court 13.4(e)(ii)(c) must be Illinois licensed attorneys in good standing.
3. Have three or more years experience in the mediator's applicable profession.
4. Have completed a minimum 40-hour mediation training program as approved by the Office of the Presiding Judge of the Domestic Relations Division.
5. Have knowledge and competence in the following areas as applicable to the issues to be mediated and in identifying impediments to mediation: domestic relations law; the impact of family conflict on parents, children and other participants; child development; participation of children in mediation; family violence; child abuse and neglect; and the impact of culture and diversity on domestic relations disputes.
6. Complete continuing education as prescribed by the Office of the Presiding Judge of the Domestic Relations Division from time to time.
7. Complete a 1.5 hour Domestic Violence Continuing Education training as approved by the Office of the Presiding Judge of the Domestic Relations Division within 6 months of being placed on the court-approved mediation list or when offered whichever is earlier.
8. Agree to handle pro bono or reduced rate mediations not to exceed 20 hours per year as required by Cook County Circuit Court Rule 13.4(e).
9. Agree to use the mediation forms promulgated by the Circuit Court of Cook County or to use such forms that are consistent with the mediation forms promulgated by the Circuit Court of Cook County.
10. Submit to an inquiry regarding all areas of the applicant's past and current profession and/or employment, and not be or have been the subject of any serious disciplinary actions.
11. Submit to background checks, if requested.
12. Be screened by the Domestic Relations' Division Mediator Screening Committee.
13. Submit a current photograph and biography sheet in the format prepared by the Office of the Presiding Judge of the Domestic Relations Division.
14. Be familiar with the ethical standards for family mediators.

APPLICATION FOR LISTING AND RENEWAL AS A CERTIFIED MEDIATOR FOR THE CIRCUIT COURT OF COOK COUNTY, DOMESTIC RELATIONS DIVISION

To be eligible to serve as a court-certified Domestic Relations Division mediator, you must meet the training and experience criteria specified in Circuit Court Rule 13.4(e).

Please type or print neatly.

- 1. Full name (first, middle initial, last): _____
- 2. ARDC Number (if applicable): _____
- 3. Address where you can be contacted: _____

- 4. Address where you will conduct mediation sessions: _____

- 5. Telephone number: _____ 6. Fax number: _____
- 7. E-mail address: _____

Domestic Relations Mediator Qualifications

- 8. Is this a new application? renewal?
- 9. If you are fluent in any language other than English, please specify: _____

10. Mediation Training

Forty-hour approved mediation training completed on _____ (date). *Please attach a copy of certificate.*

Name of Program/Trainer: _____

11. Experience

Licensed in Illinois as (select at least one) attorney psychologist social worker
 marriage and family therapist.

Please describe your professional experience and include dates. Complete on a separate page if needed.

State the percentage of your practice and approximate number of annual hours dedicated to mediation and/or other forms of Alternative Dispute Resolution.

Please include below any additional information the applicant believes would be useful in considering this application. (e.g. previous mediation experience, work as a child representative, knowledge and competence in the areas specified in Circuit Court Rule 13.4(e)(x)(b), etc.). Complete on separate page if needed. Do not provide party names.

12. Have you been censured or disciplined by any licensing body? If yes, please explain and provide dates, name of licensing body, outcome of proceedings, and copies of documents associated with the proceedings.

13. Have you been convicted of a misdemeanor or felony? If yes, please explain and provide case number, location of alleged offense, type of criminal charge, date of offense, and date of conviction.

14. Have you ever been convicted of any offense involving children? If yes, please explain and provide case number, location of alleged offense, type of criminal charge, date of offense, and date of conviction.

15. **Renewing Application**

Since being approved as a court-certified mediator, what continuing education have you attended? Specify type of training, dates, and names of trainers, and attach copy of certificate.

16. Please attach your resume/curriculum vitae with this application.

17. **Attorney Applicants:** Please select the type of mediation you will accept.

- Discretionary Only (Financial)
- Mandatory Only (Custody Related)
- Discretionary (Financial) and Mandatory (Custody Related)

AFFIDAVIT

The undersigned Affiant, under oath, states to the best of his/her knowledge that: (a) Affiant meets the requirements for service under Cook County Circuit Court Rule 13.4(e); (b) all of the responses herein are true and correct; (c) all of the supporting documents provided herein are true and correct copies of the original; (d) Affiant will charge the hourly rate set forth herein; (e) Affiant will maintain professional responsibility insurance that covers the mediation process; (f) Affiant is a member in good standing with the licensing body of the Affiant’s discipline; (g) Affiant will not discriminate against parties or attorneys on the basis of race, ethnic origin, gender, sexual orientation, religion or other protected personal characteristics; (h) Affiant will comply with the orders of court regarding cases submitted to mediation.

My hourly rate is \$_____.

I understand that so long as I am a court-certified mediator I will have a duty to report to the Office of the Presiding Judge of the Domestic Relations Division any change to the information provided in this application.

Date:_____

Signature of Applicant

**Completed Application may be submitted to the
Office of the Presiding Judge of the Domestic Relations Division as follows:**

Fax: 312-603-0070 **E-mail:** DomesticRelationsMediation@cookcountyiil.gov

Mailed/Delivered:
Office of the Presiding Judge
Domestic Relations Division
50 W. Washington, Suite 1901A
Chicago, Illinois 60602