



## BASIC MEDIATION TRAINING APPLICATION 2018 Fall Session

**INSTRUCTIONS:** A) Please complete the entire application. B) Select one of the listed registration categories at the bottom. C) Enclose your payment. D) Return the entire completed application to: Neighbor-To-Neighbor, 945 Columbia St. NE., Salem, Oregon 97301. E) Direct questions to: 503-585-0651 in Marion County or 541-223-4189 in Benton/Linn Counties:

Print Name \_\_\_\_\_  
(First) (Last)

Address \_\_\_\_\_ City/Zip \_\_\_\_\_

Cell Phone \_\_\_\_\_ Other \_\_\_\_\_ Email: \_\_\_\_\_

Current Employer \_\_\_\_\_ Position \_\_\_\_\_

1. Briefly explain your interest in taking the basic mediation training.

2. Briefly describe your employment background, including at-home or self-employment, and how it might contribute to being an effective mediator.

3. Briefly describe your education background, other training or life experiences that may also contribute to being an effective mediator.

4. Please list bilingual or other special skills or talents you possess that would help serve our diverse population.

5. Do you have a felony criminal conviction or other criminal record that might preclude your acceptance as a volunteer?  
(We will conduct a background check prior to assigning cases.)  Yes  No If yes, briefly explain below

### **REGISTRATION CATEGORIES**

(Select by placing a check mark beside one of the following)

• **FULL REGISTRATION Non-Volunteer (\$595):** \_\_\_\_\_

• **GROUP RATE FULL REGISTRATION  
(Non-Volunteer \$500 PER PERSON):** \_\_\_\_\_

**TO QUALIFY:** 1) Must submit 3 or more applications attached together with full payment for each application.  
2) List the full name of each group member below. If more space is needed, please use the reverse side of this form.

\_\_\_\_\_  
\_\_\_\_\_

• **VOLUNTEER REGISTRATION (\$295):** \_\_\_\_\_

**I COMMIT TO THE FOLLOWING:** A Practicum of 2-4 Observations, 3-6 Co-Mediations, filling out Evaluation Forms, and attending at least 4 In-Services in the first year (offered free monthly 5:30 p.m. – 7:00 p.m.)

• **REQUEST FOR REDUCED FEE (HARDSHIP)** \_\_\_\_\_  
**AVAILABILITY IS LIMITED** – To apply, please complete the attached scholarship application.

Enclosed is :  Check or  Money Order made payable to Neighbor-To-Neighbor Mediation in the amount of \_\_\_\_\_

Signature \_\_\_\_\_

Date: \_\_\_\_\_

(Rev 5/21/18)



## N2N Training Scholarship Request

**INSTRUCTIONS:** Please complete the entire Scholarship Request Form and return it along with your Training Program Application to Neighbor-To-Neighbor, 945 Columbia St. NE., Salem, Oregon 97301. Direct questions to: 503-585-0651 in Marion County or 541-223-4189 in Benton/Linn Counties:

Print Name \_\_\_\_\_ Date \_\_\_\_\_  
(First) (Last)

Cell Phone \_\_\_\_\_ Other \_\_\_\_\_ Email \_\_\_\_\_

Training program for which are requesting this scholarship funding (select one)

- Basic Mediation Training
- Parent/Teen Mediation Training
- Small Claims Mediation Training
- Victim/Offender Mediation Training

Are you currently an N2N volunteer ?  Yes  No

Do you intend to volunteer as a mediator for N2N upon completion of this training program ?  Yes  No

### Funding Request

- 1) Enter the cost of the training program \_\_\_\_\_
- 2) Enter the amount you can contribute as payment for the training \_\_\_\_\_
- 3) Calculation (amount of item 1 MINUS amount of item 2 = Amount of Funding Requested) \_\_\_\_\_

Requestor's Signature: \_\_\_\_\_

Briefly explain in 2 – 3 paragraphs, a) the nature of your hardship [why you need financial assistance for this training program; b) what other funding sources are available for you to use to cover your training cost; c) how you intend to apply the concepts and skills you gained from this training in your personal, professional, volunteer or academic experiences.

(print name)

A large empty rectangular box with a thin black border, occupying the majority of the page below the header. This area is intended for the applicant to provide details, such as a letter of recommendation or a detailed description of their training needs.