**NRM**

**MEMBERSHIP & ONLINE PROFILE APPLICATION**

Your General Details

|  |  |
| --- | --- |
| Email Address |  |
| Title |  |
| First Name |  |
| Last Name |  |
| Screen Name |  |
|  | |
| Address (Non-Public Profile) |  |
| Line 1 |  |
| Line 2 |  |
| Town |  |
| County |  |
| Country |  |
|  | |
| Address (Public Profile Version) |  |
| County |  |
| Country |  |
|  |  |
| Website |  |
| Mobile |  |
| Office Landline |  |
|  |  |
|  |  |
|  |  |

Mediation Practice Details & Professional Background

|  |  |
| --- | --- |
| List Mediation Certifications Held 1. |  |
| 2. |  |
| 3. |  |
| 4. |  |
| 5. |  |
| Do you hold a current NRM practicing Licence ? YES / NO / PENDING | |
|  | |
| Please include a copy of each certificate of accreditation held and a copy of your current practicing Licence. If your practicing licence is subject to the completion of this form and membership, please mark PENDING (do not send originals as they will not be returned to you). | |
|  | |
| Which geographic locations do you work in? |  |

*Mediation Practice Details & Professional Background cont.…*

|  |  |
| --- | --- |
| Bio of your mediation and professional background |  |
|  |  |
| Mediation Practice Areas 1. |  |
| 2. |  |
| 3. |  |
|  |  |
| Description of Mediation Style |  |

*Mediation Practice Details & Professional Background cont.…*

|  |  |
| --- | --- |
| Code of Conduct Subscribed to 1. |  |
| 2. |  |
|  |  |
| Complaints process subject to 1. |  |
| 2. |  |
|  |  |
| Professional Indemnity Insurance |  |
| Education & Training | |
| Details of your formal mediation education |  |
|  |  |
| Other relevant training & education |  |

References

|  |  |
| --- | --- |
| Reference 1 |  |
| Name |  |
| Profession |  |
| Contact Number |  |
| Email |  |
| Reference 2 |  |
| Name |  |
| Profession |  |
| Contact Number |  |
| Email |  |

Please make sure you have fully completed this form, also that you have enclosed copies of all backup documentation. Should required details or documents be missing it will delay your application being processed.

If Payment of Fees is to be made by cheque or draft it should be made payable to:

**National Register of Mediators**

If paying via bank transfer or online banking please use the following account details and use your name as a reference:

**IBAN:** IE29IPBS99066521566669 **BIC:** IPBSIE2D

**2014 Fee Structure**

|  |  |
| --- | --- |
| Membership, Practicing Licence & Profile listing | 155.00 euro |
| ***Membership / Profile listing / Practicing Licence is for a 12 month period from date of issue*** | |

Please also issue a profile photo via email to us. The photo should reflect a professional image and be 500 pixels in height & 375 pixels in width.

**Code of Conduct & Complaint Process Declaration**

If you wish to be governed by the National Register of Mediators code of professional conduct please tick this box ☐

If you wish to be governed by the National Register of Mediators complaint process, please tick this box ☐

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