

P. O. Box 2504; Boise, Idaho 83701 www.idahomediationassociation.org admin@idahomediationassociation.org

## **Certified Professional Mediator (CPM) Application** \$100 \$100

Submit your application and all supporting documents in PDF format to the above email.

Please read and follow all directions carefully to avoid delays in	processing your application.	
Name (as you want it to appear on your CPM Certificate)	Date	
Mailing Address		
E-Mail	Phone	
<b>Are you a current IMA member in good standing?</b> You must have paid this year's dues for either general or student membership and have a valid e-mail address on file with IMA.		
☐ Yes ☐ No (You must join IMA prior to subgo to www.idahomediationassoc		
Application checklist (you must submit this application and all supporting documents in PDF format to <a href="mailto:admin@idahomediationassociation.org">admin@idahomediationassociation.org</a> ):		
<ul> <li>Documentation of Basic Mediation Training: Attach a college transcript showing successful completion of a 4 college credit = 15 hours), specifying the delivery forma</li> <li>Name and contact information of the sponsoring</li> <li>Title of the course</li> <li>Dates</li> </ul>	0-hour basic mediation course (1 t (live, Zoom, etc.) Include:	
<ul> <li>Number of course hours or college credits</li> <li>If not certified by IMA (see IMA website for licourse outline or other information sufficient to expect the course outline).</li> </ul>	/· ±	
<ul> <li>Documentation of Additional Mediation Training: Atta or college transcripts showing successful completion of mediation training, completed within the four (4) years application (1 college credit = 15 hours). For each training.</li> <li>Name and contact information of the sponsoring.</li> <li>Title of the course/training activity.</li> <li>Dates and delivery method (live, Zoom, etc.)</li> </ul>	a minimum of 40 hours of other immediately preceding the CPM and activity or course, include:	

- Number of course hours or college credits
- If not certified by IMA (see IMA website for list of certified courses), provide a course outline or other information sufficient to evaluate the curriculum (required)
- If submitting a college transcript, clearly identify the course(s) on the transcript

	<u>Documentation of Mediation Case Practice</u> : Submit a Mediation Case Practice Log on the IMA form, signed by you, documenting 60 hours of actual mediation within the four (4) years immediately preceding the application, of which at least 30 hours must be as lead or solo mediator. For each mediation, include date, time spent, and type of case, and note
	whether it is a mentored or lead/solo case. Redact any personal information.
	<u>Simple Memorandum of Understanding/Mediation Agreement (MOU/MA)</u> : Submit an MOU/MA that includes as many clauses as necessary to adequately address the resolution of <u>one</u> (1) mediated issue/topic.
	Complex Memorandum of Understanding/Mediation Agreement (MOU/MA): Submit an MOU/MA that includes as many clauses as necessary to adequately address the resolution of a dispute that includes a minimum of <u>four</u> (4) mediated issues/topics. NOTE: Please submit mediation agreements that correlate to your mediation practice. Your agreements should stand alone and demonstrate your ability to write a complete, enforceable agreement. If using MOU/MAs from actual cases, redact names and other personal identifying information such as addresses, social security numbers, birthdates, etc. Do not submit boilerplate, fill-in-the-blank, or court provided forms, small claims court or eviction court stipulations, etc.
	<b>NOTE:</b> To be enforceable, mediation agreements must be "clear and unequivocal." Agreements must specifically require a person to do or refrain from doing something. ( <i>See</i> Thompson v. Bybee, Idaho Court of Appeals Opinion No. 64, October 17, 2016.)
	Application Fee: \$100. NOTE: Upon receipt of your application, the Administrator will generate an invoice for the application fee. The invoice will attach to your IMA account, and you can either pay online through the IMA website or mail a check to IMA at P. O. Box 2504, Boise, Idaho 83701. Your application is considered complete only after all documents and payment have been received.
	DECLARATION OF COMPLIANCE
I, _	declare under penalty of perjury as
1.	I am the person named herein, and I have personally fulfilled the requirements for Certified Professional Mediator (CPM) as set forth in this application.
2.	The documentation contained in this Application is true and correct to the best of my knowledge, information, and belief.
3.	Once certified, I agree to abide by the IMA Standards of Practice and IMA Policies & Procedures.
Sig	gnature Date