**APPLICATION FOR DOMESTIC RELATIONS MEDIATORS**

**BOULDER DISTRICT COURT**

**CO-MEDIATOR APPLICATION**

Name:

Business Name (if any):

Business Address:

Work Phone:

Cell Phone:

Email:

Attorney Registration Number (if applicable):

Please check all of the following:

I certify that I have completed a 40 hour comprehensive mediation training and I have attached a copy of my mediation training certificate or the certificate is not available and I certify that the following is true:

Date of training:

Provider:

Number of hours of training:

I certify that I have, or will, attend the 1.5 hours of domestic relations mediation training at the Boulder Justice Center.

Please indicate if you have a preference regarding the type of issues which you wish to mediate:

I prefer to mediate only issues regarding financial matters.

I prefer to mediate only issues regarding parenting matters.

I will mediate both financial and parenting matters.

By signing below, I agree to volunteer for the Domestic Relations Mediation Project by committing to mediate at least two hours during the next 12 month period, to follow the AFCC Model Standards of Practice for Family and Divorce Mediation, <http://www.afccnet.org/Portals/0/PublicDocuments/CEFCP/ModelStandardsOfPracticeForFamilyAndDivorceMediation.pdf>, and all requirements of this particular program as set forth by the 20th Judicial District.

Date:       Signature/Electronic Signature:

**Applications may be submitted to the Boulder Justice Center, 1777 Sixth Street, Boulder, CO 80302, attention Monica Haenselman, or via email to:** [**monica.haenselman@judicial.state.co.us**](mailto:monica.haenselman@judicial.state.co.us)