



Ninth Judicial Circuit Alternative Dispute Resolution County Mediator Application

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Mailing Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ Email: _____

Date of Birth: _____ Florida Supreme Court Mediator Number: _____

Florida Certifications: FAMILY CERTIFIED COUNTY CERTIFIED DEPENDENCY CERTIFIED

Are you a citizen of the United States? YES NO If no, are you authorized to work in the U.S.? YES NO

Have you ever been convicted of a crime? YES NO If yes, explain? _____

Emergency Contact Name: _____ Phone Number: _____

Relationship to mediator: _____

Availability and Location

Which do you prefer: IN PERSON MEDIATION VIRTUAL MEDIATION

If you selected virtual, what virtual platform will you use? ZOOM MICROSOFT TEAMS OTHER

Please select the days and times you will be available to mediate. You will only be scheduled for mediations during these times.

Monday: AM: 9:00am – 11:30am PM: 1:30pm – 4:00pm
Tuesday: AM: 9:00am – 11:30am PM: 1:30pm – 4:00pm
Wednesday: AM: 9:00am – 11:30am PM: 1:30pm – 4:00pm
Thursday: AM: 9:00am – 11:30am PM: 1:30pm – 4:00pm
Friday: AM: 9:00am – 11:30am Other: _____

For *in person* mediations, which County do you prefer? ORANGE COUNTY OSCEOLA COUNTY

How would you like your cases scheduled? Every 30 minutes or every hour? 30 MINUTES HOURLY

Please note: for all mediator cancellations, notice should be given by the mediator to the department staff at least 48 hours prior to the scheduled mediation.

References

Please list two professional references.

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to a contract with the Ninth Judicial Circuit, I understand that false or misleading information in my application or interview may result in my release.

Signature: _____ Date: _____