

IN THE  
**SUPREME COURT**  
 OF THE  
**COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS**

**IN RE APPLICATION FOR CNMI COURT-APPROVED MEDIATOR OF  
 [APPLICANT'S NAME].**

**APPLICATION FOR CNMI COURT-APPROVED MEDIATOR OF [APPLICANT'S NAME]**

I, [Applicant's Name], hereby respectfully submit this Application for Approval as a CNMI Court-Approved Mediator. I have personal knowledge of all of the facts set forth herein and, if called as a witness, could and would competently testify thereto under oath.

Date of Birth:	
Law Firm Name:	
Business Address:	
Business Telephone Number:	
Cellular Telephone Number:	
Email Address:	

**Bar Membership**

Jurisdiction	Date of Admission	Bar Number

• *If additional space is required, please attach page(s) to this form.*

**Mediator/ADR Training**

Date	Location	Course Name

• *If additional space is required, please attach page(s) to this form.*

The number of mediations & settlement conferences I have conducted as a mediator, judge, or settlement officer:	
The number of mediations & settlement conferences I have attended as a party:	

**Services as a Judge, Magistrate, or Commissioner**

Jurisdiction(s)	Position(s)	Date(s)

• *If additional space is required, please attach page(s) to this form.*

In addition to the education, training, and experience set forth above, I have had the following education, training and experience in regard to mediation and/or ADR:

In support of this Application, I submit the following additional factual information:

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I have carefully read and am familiar with the NMI Rules for Mandatory Alternative Dispute Resolution and the CNMI Supreme Court Guidelines and Requirements. If this Application is granted and I become a CNMI Court-Approved Mediator, I will abide by such Rules and Guidelines.

I declare under penalty of perjury that the forgoing is true and correct.

DATED this \_\_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
[APPLICANT'S NAME]