**Proposal Form**

|  |  |  |  |
| --- | --- | --- | --- |
| **Section 1: Contact Information** | | | |
| 1A | Name (Last, First and Middle): | |  |
| 1B | Address: | |  |
| 1C | Phone Number: | |  |
| 1D | Email Address: | |  |
| **Section 2: Education** | | | |
| 2A | Please list your degree (e.g. master, doctoral, juris doctorate, or bachelor of laws), field of study, school, and year of issuance. You are encouraged to submit a copy of your degree with this proposal. | |  |
| **Section 3: Training** | | | |
| 3A | Please list any dependency mediation training courses you have taken and the number of hours completed. Include initial dependency mediation training completed, and continuing education training completed in 2024. (Use additional spaces as needed.) You are encouraged to submit copies of training certificates. | |  |
| **Section 4: Licensing** | | | |
| 4A | Please list what type of license you have (e.g. MFT, LCSW, psychology, bar), year of issuance, and license number. You are encouraged to submit a copy of your license certificate. | |  |
| **Section 5: Languages** | | | |
| 5A | Please list other languages and dialects you can speak fluently. | |  |
| **Section 6: Work Experience** | | | |
| 4 | Provide relevant work experience. Experience in mediation, preferably in a setting related to juvenile dependency or domestic relations is preferable. (Add additional lines as needed.) | | |
| Employer name | | Start date and end date | Job title, practice area, and work performed |
|  | |  |  |
|  | |  |  |
|  | |  |  |
| **Section 7: Proposal** | | | |
| 5 | Explain how you are qualified and suitable to provide services as a contract dependency mediator (use additional spaces as needed): | | |
|  |  | | |
| **Section 8: Professional References** | | | |
|  | Professional Reference 1: | | |
|  | Name, title, and organization: | |  |
|  | Phone number: | |  |
|  | Email address: | |  |
|  | Explain how you know this reference and provide time period you had worked with this reference: | |  |
|  | Professional Reference 2: | | |
|  | Name, title, and organization: | |  |
|  | Phone number: | |  |
|  | Email address: | |  |
|  | Explain how you know this reference and provide time period you had worked with this reference: | |  |
|  | Professional Reference 3: | | |
|  | Name, title, and organization: | |  |
|  | Phone number: | |  |
|  | Email address: | |  |
|  | Explain how you know this reference and provide time period you had worked with this reference: | |  |