



APPLICATION FOR INITIAL ACCREDITATION AS AN AMDRAS ACCREDITED MEDIATOR

AUSTRALIAN MEDIATOR AND DISPUTE RESOLUTION ACCREDITATION STANDARDS (AMDRAS)

Before completing this form, you should familiarise yourself with:

- The Australian Mediator and Dispute Resolution Accreditation Standards (**AMDRAS**), effective 1 July 2025.

A copy is available on the AMDRAS website at www.amdras.au/resources and the Bar Association of Queensland (**Association**) at www.qldbar.asn.au.

The information requested on this form will be used to process your application for accreditation under AMDRAS. If your application is successful, your name will be listed on the Association's website as AMDRAS Accredited, and on the AMDRAS National Register maintained by the AMDRAS Board.

A. PERSONAL DETAILS

NAME:	
MEMBER ID:	
CHAMBERS ADDRESS:	
PHONE NUMBER:	
EMAIL:	

B. TRAINING AND ASSESSMENT

<p>1. Have you met the Certificate of Training (CoT) requirements prescribed in Division 5 of AMDRAS? Please attach a copy of your CoT and any other relevant supporting documents as evidence of your training.</p> <p><input type="checkbox"/> Yes, I have completed a Certificate of Training Course which meets the requirements in Division 5 of AMDRAS, being:</p> <ul style="list-style-type: none">o a minimum duration of 45 hours;o at least nine (9) simulated mediations or practice sessions of 1.5 hours each; ando performed the role of mediator in at least three (3) of the simulated mediations/practice sessions.
<p>2. Have you met the Certificate of Assessment (CoA) requirements prescribed in Division 6 of AMDRAS? Please attach a copy of your CoA and any other relevant supporting documents as evidence of your assessment.</p> <p><input type="checkbox"/> Yes, I have completed a Certificate of Assessment which meets the requirements in Division 6 of AMDRAS, being:</p> <ul style="list-style-type: none">o completed within 12 months of your CoT;o a written assessment of 1200 words;o a standardised simulated mediation of at least 2 to 2.5 hours duration; ando observed by a qualified assessor.
OR

3. Do you seek to rely on a separate qualification or which may allow accreditation via an alternative pathway in accordance with Division 8, Part IV AMDRAS?

Yes, I intend to seek accreditation via an alternative pathway.

If **YES**, please provide:

- (a) evidence of that qualification,
- (b) the reasons it is equivalent to or greater than the requirements for the COA, those being:
 - o completed within 12 months of your CoT;
 - o a written assessment of 1200 words;
 - o a standardised simulated mediation of at least 2 to 2.5 hours duration; and
 - o observed by a qualified assessor.
- (c) two written references which attest to your good character from practitioners who have known you for at least three years.

C. GOOD CHARACTER

To be accredited by the Association, you must provide the following declarations in relation to good character.

(a) Are you of good character and do you possess personal qualities and experience appropriate to conducting mediations or other dispute resolution processes independently, competently and professionally?	YES / NO
(b) Do you hold a current <u>private Bar</u> practising certificate issued by the Association?	YES / NO
(c) Have you at any time been disqualified from any type of professional practice? (if YES, please attach a detailed statement and explanation).	YES / NO
(d) Have you been convicted of a criminal offence/s? (if YES, please attach a detailed statement and explanation).	YES / NO
(e) Do you have any impairment that could influence your capacity to discharge your obligations as a mediator in a competent, honest and professional manner? (if YES, please attach a detailed statement and explanation).	YES / NO
(f) Have you ever been refused NMAS or AMDRAS accreditation or accreditation renewal? (if YES, please attach a detailed statement and explanation).	YES / NO
(g) Have you ever had your mediation accreditation suspended or cancelled? (if YES, please attach a detailed statement and explanation).	YES / NO
(h) Are you a member of the Bar Association of Queensland (a Recognised Accreditation Provider (RAP)) and do you acknowledge that your continuing AMDRAS accreditation by the Association depends on you remaining a member?	YES / NO

D. UNDERTAKINGS AND DECLARATIONS

The Association requires applicants to bring to its attention any 'adverse circumstances', including circumstances that do or that may reasonably be expected to adversely affect an applicant's professional or community standing and good repute, including any adverse findings by any disciplinary body, convictions or bankruptcy proceedings or bankruptcy debt arrangements since the date of admission to practice. You do not need to notify the Association of matters which you have already brought to the Association's attention.

(a) I have read and understood my obligations under the AMDRAS Training and Accreditation Framework (TAF) for persons seeking accreditation and for a mediator already accredited under the AMDRAS;	YES/NO
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(b) I undertake to comply with the AMDRAS Professional Practice Domains which apply to AMDRAS accredited mediators;	YES/NO
(c) I undertake to comply with any relevant legislation, professional standards and any other requirements that may be relevant to your practice as a barrister and AMDRAS accredited mediator conducting mediations. In particular, if I use a 'blended' mediation process, such as advisory or evaluative mediation or conciliation, I undertake to comply with the requirements set out in Appendix 4 – Professional Practice Domains (Professional Skills Domain, clause 61.2 (h));	YES/NO
(d) I understand that if my application for AMDRAS accreditation is successful, my accreditation with the Association for a period of two (2) years is dependent upon my holding a private Bar practising certificate and professional indemnity insurance during that entire period;	YES/NO
(e) I agree to the Association making enquiries about me concerning my fitness to be an AMDRAS accredited mediator. I undertake to notify the Association in writing if my name is included on the Association's list of AMDRAS accredited mediators, if and when I become aware of any adverse circumstances, within the meaning referred to above;	YES/NO
(f) I consent to the Association providing my name/contact details to the Courts, Tribunals, organisations or persons for referral for mediations;	YES/NO
(g) I consent to the Association providing my name and contact details to the AMDRAS Board for the purpose of including those details on the National Mediator Register. I acknowledge the Association can disclose information about me to the AMDRAS Board and the AMDRAS Board can release it to other RAPs upon request; and	YES/NO
(h) Acknowledging that your professional responsibilities as a legal practitioner are regulated by the <i>Legal Profession Act 2007</i> (Qld) (LPA) do you acknowledge and agree to be bound by AMDRAS Part 5 – The Professional Practice Domains, specifically Domain 3 – Professional Ethics and Responsibilities where they do not conflict with your professional obligations as a legal practitioner?	YES/NO

I declare that the answers to the above questions are true and correct.

Signed: _____ Date: _____

E. INSURANCE

Are you covered by relevant professional indemnity insurance?	YES / NO
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F. ACCREDITATION WITH ANOTHER RECOGNISED ACCREDITATION PROVIDER

Are you currently accredited as a mediator by another RAP? If YES, please provide name of other RAP _____	YES / NO
Have you already paid a registration fee to another RAP?	YES / NOT APPLICABLE

G. DECLARATION

I _____ of _____ declare the information and particulars set out in this application are true in substance and in fact to the best of my knowledge.

SIGNATURE

DATE

H. REGISTRATION FEE

The following registration fees apply to each level of accreditation and are inclusive of GST:

1. Accredited Mediator: \$315;
2. Advanced Mediator: \$345; and
3. Leading Mediator \$375.

This fee is collected by the Association for each two-year period of AMDRAS accreditation (i.e., renewal).

No fee is payable with this application if you are already registered with another RAP.

Please return the completed form to: legal@qldbar.asn.au

Payment will be processed by the Association's Finance Department upon approval of accreditation.

A tax invoice will be emailed to you for payment of the above applicable fee. This invoice may be paid by BPay or by credit card.