

COURT OF COMMON PLEAS  
DIVISION OF DOMESTIC RELATIONS  
DISPUTE RESOLUTION DEPARTMENT  
HAMILTON COUNTY, OHIO

**Co-Mediation Training Application**  
**(20 hours required)**

Name \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone (     ) \_\_\_\_\_ Email \_\_\_\_\_

Profession \_\_\_\_\_ License # \_\_\_\_\_

**EDUCATION**

Undergraduate Degree/Major \_\_\_\_\_

School \_\_\_\_\_ Date \_\_\_\_\_

Graduate Degree/Major \_\_\_\_\_

School \_\_\_\_\_ Date \_\_\_\_\_

**PROFESSIONAL EXPERIENCE** (relevant to accreditation standards)

Organization \_\_\_\_\_

Address \_\_\_\_\_

Dates \_\_\_\_\_ Supervisor \_\_\_\_\_

Scope of Practice/Population Served \_\_\_\_\_

Organization \_\_\_\_\_

Address \_\_\_\_\_

Dates \_\_\_\_\_ Supervisor \_\_\_\_\_

Scope of Practice/Population Served \_\_\_\_\_

Organization \_\_\_\_\_

Address \_\_\_\_\_

Dates \_\_\_\_\_ Supervisor \_\_\_\_\_

Scope of Practice/Population Served \_\_\_\_\_

**TRAINING IN MEDIATION (Submit copy of certificate from training)**

Basic Mediation Training (12 hours)

Location \_\_\_\_\_ Date \_\_\_\_\_

Specialized Family/Divorce Mediation (40 hours)

Location \_\_\_\_\_ Date \_\_\_\_\_

Domestic Abuse Issues: Training for Mediators & Other Professionals (12 hours)

Location \_\_\_\_\_ Date \_\_\_\_\_

**ADDITIONAL TRAINING/EXPERIENCE**

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**Please attach a copy of your resume**

Signature \_\_\_\_\_ Date \_\_\_\_\_

Submit application to:

Director, Dispute Resolution Department  
Hamilton County Domestic Relations Court  
800 Broadway  
Cincinnati, Ohio 45202