

# State of Michigan



KEVIN A. ELSENHEIMER  
THOMAS G. POWER  
CIRCUIT JUDGES

## Thirteenth Judicial Circuit

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(231) 922-4701  
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COUNTIES  
ANTRIM  
GRAND TRAVERSE  
LEELANAU

TRINA GIRARDIN  
Court Administrator

### APPLICATION: DOMESTIC RELATIONS MEDIATOR

An applicant for approval as domestic relations mediator for the 13<sup>th</sup> Circuit Court must complete this application form, *attach a copy of your résumé* and return it to the ADR Clerk – Trina Girardin at [tgirardin@13thcircuitcourt.org](mailto:tgirardin@13thcircuitcourt.org). Pursuant to MCR 3.216(G), to be eligible to serve as a domestic relations mediator, you must meet certain minimum qualifications.

1. I completed a State Court Administrator approved domestic relations mediation training program held at \_\_\_\_\_ on \_\_\_\_\_.  
(Please attach a copy of your certificate of training.)
2. I am \_\_\_\_\_ a licensed attorney, \_\_\_\_\_ a licensed professional counselor, \_\_\_\_\_ a licensed or limited licensed psychologist, \_\_\_\_\_ a licensed marriage and family therapist, Or, I have \_\_\_\_\_ a masters degree in counseling, \_\_\_\_\_ a master's degree in marriage and family therapy, \_\_\_\_\_ a masters degree in social work, \_\_\_\_\_ a graduate degree in a behavioral science,  
  
Or, I have \_\_\_\_\_ five years experience in family counseling.
3. I have observed two domestic relations mediation proceedings conducted by \_\_\_\_\_ and \_\_\_\_\_, approved mediators, on \_\_\_\_\_ and \_\_\_\_\_ and I have conducted one domestic relations mediation to conclusion under the supervision and observation of \_\_\_\_\_, an approved mediator on \_\_\_\_\_.  
(Please attach verification from the approved mediators or CDRP.)
4. \_\_\_\_\_ I have specialized experience or training, but do not meet the specific requirements for a domestic relations mediator. I am applying for special approval. On the reverse side of this form or on a separate sheet of paper, please provide details about your specialized experience or training.
5. I will charge \_\_\_\_\_ for my services as a mediator or

My fee for mediation services will be determined as follows: \_\_\_\_\_

I am willing to provide \_\_\_\_\_ hours of reduced fee domestic relations mediation services per year.  
I am willing to provide \_\_\_\_\_ hours of pro bono domestic relations mediation services per year.

6. I will mediate \_\_\_\_\_ property issues **only**; \_\_\_\_\_ child-related issues **only**; or \_\_\_\_\_ any contested issue.
7. I am \_\_\_\_\_ willing or \_\_\_\_\_ not willing to provide an evaluation of the case if requested by the parties to do so.
8. To maintain your approval as a domestic relations mediator, you are required to obtain 8 hours of advanced mediation training during each 2-year period. Please provide documentation establishing compliance as soon as it becomes available.
9. OPTIONAL: Race \_\_\_\_\_ Ethnic Origin \_\_\_\_\_ Gender \_\_\_\_\_

I hereby certify that I meet the requirements for service under the Court's ADR Plan; that I will not discriminate against parties or attorneys on the basis of race, ethnic origin, gender or other protected personal characteristic; and that I will comply with the Court's ADR Plan and orders of the court regarding cases submitted to mediation; and that I will conduct myself with honesty, integrity, and impartiality in providing mediation services according to Standards of Conduct adopted by the State Court Administrator.

Date: \_\_\_\_\_

\_\_\_\_\_  
(Signature)

E-Mail: \_\_\_\_\_

\_\_\_\_\_  
(Print name)

Return to:

**Judy M. Telgenhof**  
**13th Circuit Court**  
**ADR Clerk**  
**jtelgenhof@13thcircuitcourt.org**  
**231-922-4741**