

WEST HAWAI'I MEDIATION CENTER

PO Box 7020, Kamuela, HI 96743 808-885-5525 ~ 808-326-2666 808-887-0525 (fax) ~ info@whmediation.org www.whmediation.org

Basic Mediation Training January 26-28, 2018 Hawaii Community College—Palamanui Campus (Kona)

Please complete the form below and include check made payable to West Hawai'i Mediation Center and mail to address above or call to arrange a credit card payment. Spots are not reserved until payment is received.

Name:	Birthdate:
Phone: Home:	Cell:
Mailing Address:	
E-mail:	
Highest level of school comple	eted: (please circle one)
Some high school High scho	ol Some college College degree Masters Doctorate
Languages spoken:	
Why are you interested in me	ediation training?
Family/Divorce Neighbor/La	ou most interested in learning how to handle? (circle all that apply) andlord-Tenant Real Estate/Condo Youth Mediation Other ng a volunteer mediator if you are selected for our apprenticeship (circle one) Yes No
How did you hear about our Lunch will be provided all thr I understand that this application is a careful screening process and is	training? ee days. Do you have any dietary restrictions? for one 24-hour basic mediation training and that selection of apprentices will be based or not guaranteed. While we hope trainees will be interested in being considered for our elcome to take this training even if you do not plan to become a volunteer mediator.

Signature: _____