



SINGAPORE MEDIATION CENTRE

IMI Application Form

(1) PERSONAL INFORMATION	
Salutation (<i>Check the relevant box</i>) <input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Mdm <input type="checkbox"/> Ms <input type="checkbox"/> Other: _____	
Full Name (<i>As appears in NRIC / Passport or Other Official Document; please <u>underline</u> surname</i>):	
Citizenship:	
Correspondence Address:	Permanent Address (If different from above)
Contact Number:	Email Address:
(2) IMI CREDENTIALING APPLICATION	
<i>Check the relevant box</i>	
<input type="checkbox"/> IMI Qualified Mediator Level (New Mediator) <input type="checkbox"/> IMI Certified Mediator (Experienced Mediator)	
(3) HIGHEST ACADEMIC QUALIFICATIONS	
<i>Please also provide the name of the awarding institution</i>	
(4) MEDIATION TRAINING & EXPERIENCE	
(Please provide a brief summary (not more than 100 words) of your mediation experience and training received. Please attach supporting documentation, where necessary.)	

(5) EMPLOYMENT				
Date of Joining	Organisation Name	Country	Position Held	Nature of Work
(6) PROFESSIONAL AFFILIATIONS				
(7) REFERENCES				
<i>Please provide the particulars of two references whom we can contact.</i>				
(i) Name & Designation		(ii) Name & Designation		
Organisation / Designation		Organisation / Designation		
Email Address		Email Address		
(8) CHECKLIST				
* Please delete accordingly				
<input type="checkbox"/> IMI QAP Application Form (All Levels) <input type="checkbox"/> Case Tracking Template (For Certified Mediator only) <input type="checkbox"/> IMI Feedback Forms – Minimum 10 (For Certified Mediator only) <input type="checkbox"/> QAP Assessment result (For Certified Mediator only)				