

**VOLUNTEER MEDIATOR DATA SHEET**  
**SETTLEMENT WEEK**  
**SEPTEMBER 15 through 19, 2008**

NAME: \_\_\_\_\_

FIRM/EMPLOYER: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

Please indicate any time that you **CANNOT** mediate: (Note: all mediations will be scheduled for a half-day beginning at either 8:30 a.m. or 1:30 p.m.)

Monday	09/15/08 a.m.	_____	Monday	09/15/08 p.m.	_____
Tuesday	09/16/08 a.m.	_____	Tuesday	09/16/08 p.m.	_____
Wednesday	09/17/08 a.m.	_____	Wednesday	09/17/08 p.m.	_____
Thursday	09/18/08 a.m.	_____	Thursday	09/18/08 p.m.	_____
Friday	09/19/08 a.m.	_____	Friday	09/19/08 p.m.	_____

Do you have office space available to conduct mediations? Yes \_\_\_\_\_ No \_\_\_\_\_

Are there any types of cases you **DO NOT** wish to mediate? \_\_\_\_\_

Will you be submitting any cases for Settlement Week mediation? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please list cases by Style and Cause Number: \_\_\_\_\_

Have you previously served as a Settlement Week mediator? Yes \_\_\_\_\_ No \_\_\_\_\_

**IF NO, Please list qualifications:**

\_\_\_\_\_ Year licensed to practice law.

\_\_\_\_\_ Number of mediations performed in last 24 months (excluding Settlement Week).

\_\_\_\_\_ If applicable, year you completed 40-hour basic mediation training.

\_\_\_\_\_ If applicable, year you completed 24-hour family/divorce mediation training.

Other qualifications: \_\_\_\_\_

**PLEASE RETURN THIS VOLUNTEER MEDIATOR DATA SHEET, BY 08/29/08 TO:**

Michael J. Kopp  
Executive Director  
McLENNAN COUNTY DRC  
P. O. Box 1488  
Waco, TX 76703-1488

**THANK YOU FOR VOLUNTEERING YOUR TIME AND TALENT TO SETTLEMENT WEEK! YOU ARE APPRECIATED!!!**