

**Application for Placement on Court Roster as Criminal Mediator**

**(I.C.R. 18.2 and I. J.R. 12.1)**

**Name:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **County:** \_\_\_\_\_ **State:** \_\_\_\_ **Zip:** \_\_\_\_\_

**Telephone:** \_\_\_\_\_

**E-Mail Address:** \_\_\_\_\_

**Indicate the judicial districts or counties in which you are willing to mediate cases:**

\_\_\_\_\_

**Criminal Mediation Training**

**Name of Course:** \_\_\_\_\_

**Place and date of training:** \_\_\_\_\_

**Number of Hours:** \_\_\_\_\_

**Name of Course:** \_\_\_\_\_

**Place and date of training:** \_\_\_\_\_

**Number of Hours:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

**Please send to:**

**Idaho Supreme Court  
Administrative Director of the Courts  
451 West State Street  
P.O. B ox 83720  
Boise, ID. 83720-0101**