

SINGAPORE MEDIATION CENTRE

IMI Qualifying Assessment Programme Application Form

(1) PERSONAL INFORMATION	
Salutation (<i>Tick (☐) relevant box</i>) <input type="checkbox"/> Dr <input type="checkbox"/> Professor <input type="checkbox"/> Mr <input type="checkbox"/> Ms <input type="checkbox"/> Other:	<i>Please paste photo here</i>
Full Name (<i>As appears in NRIC / Passport or other Official Document; please underline surname</i>):	
Date of Birth: (<i>dd/mm/yy</i>)	Place of Birth:
Correspondence Address:	Telephone No:
	Hand phone No:
Postal Code: Country:	
Permanent Address (<i>If different from above</i>)	
Postal Code: Country:	
Email Address:	
Citizenship:	
Highest Academic Qualifications (<i>Please also provide the name of the awarding institution</i>)	

(2) 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.)

(3) MEDIATION LOG

(Please provide details of the mediation cases you have done using the mediation log provided below. Please attach a separate sheet if you require more space.)

S/N	Dates	Description <i>(please provide SMC case no where applicable)</i>	Duration (hours)	Remarks
Total Number of Hours:				

(4) EMPLOYMENT			
Date of Joining	Organisation Name, Country and Contact Number	Position Held	Nature of Work
(5) PROFESSIONAL AFFILIATIONS			
(6) 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	
Telephone No		Telephone No	