



# VOLUNTEER MEDIATOR APPLICATION

## Mountain View Mediation Program

**Submit Completed Application by March 20, 2020 at 4:00pm**

Please **E-mail** to [mediate4mv@housing.org](mailto:mediate4mv@housing.org) OR **US Mail** to MVMP c/o Project Sentinel,  
1490 El Camino Real, Santa Clara, CA 95050

Name \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone (\_\_\_\_) \_\_\_\_\_ Cell Phone (\_\_\_\_) \_\_\_\_\_ Birth Month/Day \_\_\_\_\_

E-Mail \_\_\_\_\_ Driver's License # \_\_\_\_\_

Indicate the highest grade of school you have completed: 1 2 3 4 5 6 7 8 9 10 11 12 or More \_\_\_\_\_

High School Graduate? \_\_\_ Yes \_\_\_ No If No, Passed High School Equivalency Test: \_\_\_ Yes \_\_\_ No

Name and Location of College/University \_\_\_\_\_

Degree \_\_\_\_\_ If no degree, number of years attended \_\_\_\_\_

Special Training/Licenses, Professional Registration and Skills \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### WORK EXPERIENCE

Are you presently employed? (Mark "X" by all that apply.)

\_\_\_ Employed Full-Time

\_\_\_ Employed Part-Time

\_\_\_ Temporarily Unemployed

\_\_\_ Retired

\_\_\_ Looking for Work

\_\_\_ Full-Time Student

\_\_\_ Part-Time Student

\_\_\_ Homemaker

Current employer or school name \_\_\_\_\_ Job Title or School Year \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

### VOLUNTEER EXPERIENCE

Date (Present or Previous)

Organization

Responsibilities

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## INTEREST IN MEDIATION PROGRAM

Please answer all the questions so that we may better understand your interest in serving as a **volunteer** mediator.

Resident of Mountain View?    ☐ Yes    ☐ No

How are you connected to the City of Mountain View? (Mark "X" by all that apply.)

☐ Homeowner                      ☐ Renter                      ☐ Landlord of property in the City                      ☐ Employed in the City  
☐ Business owner in the City    ☐ Other \_\_\_\_\_

1. Why would you like to become a volunteer mediator for the City of Mountain View?

---

---

2. What does mediation mean to you?

---

---

3. Have you ever been involved in a mediation session as a participant or a mediator?

---

---

4. Which of your skills do you feel would be useful to you as a mediator? Why?

---

---

5. What skills do you want to develop or enhance through mediation training/practice?

---

---

6. How did you learn about the program? \_\_\_\_\_

---

---

7. Are you fluent in any languages other than English? If so, please list them. \_\_\_\_\_

---

---

If you wish, please include any additional comments or references on a separate sheet of paper.

I hereby certify that all statements made in this application are true and I authorize investigation of all matters contained within. I acknowledge that any false statements or misrepresentation on this application will be grounds for refusal of placement or immediate dismissal at any time during the period of my placement. I am aware that fingerprinting may be required before placement in some positions. I understand it is the policy of the City of Mountain View to preserve the right to equal opportunity for all persons, including those with physical, mental or sensory disabilities.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_