



RIVERDALE MEDIATION

Internship Application

Name _____
First Middle Last

Address _____
Street _____
City Province Postal Code

Telephone () - _____ Cell Phone () - _____

Email Address _____

How would you prefer to be contacted? _____ phone _____ email

What form of internship are you seeking? _____ case by case _____ full

Have you completed basic mediation training (40 hours)? _____

Have you completed 14 hours of training for power, abuse and domestic violence in ADR? _____





RIVERDALE MEDIATION

EDUCATION

Please list the general schooling you have completed.
(i.e. Undergraduate, Graduate, Law School, etc.)

School	Degree / Certification	Year Completed
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

WORK OR VOLUNTEER EXPERIENCE

Please list the work/volunteer experience you have obtained that you believe will benefit you in the role of an intern at Riverdale Mediation.

Year	Position	Business Name	Duties and Responsibilities	Reference Name and Contact
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____





RIVERDALE MEDIATION

MEDIATION OR NEGOTIATION TRAINING

Please list all relevant training you have obtained to date.

Dates	Name of Course	Length of Course	School/Organization
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

OTHER TRAINING

Please list all other training that you possess that you believe make you a strong candidate for an internship.

Please write a short response as to why you would like to become an intern at Riverdale Mediation. Please include your goals and expectations as well as what you would like to accomplish while interning at Riverdale Mediation.





RIVERDALE MEDIATION

What aspects of the internship program particularly interest you? For example, would you like to assist with research, focus on building certain skills, become involved in professional organizations, etc?

When are you available?

___ Monday ___ Tuesday ___ Wednesday ___ Thursday ___ Friday

How much time can you commit to per week?

When would you like your internship to start and end? (Month / Year)

Start

 End

Do you have professional liability insurance? If so, please provide details.

Is there anything else you think we should know about yourself that would separate you from others in experience, skill and knowledge?

