

Application Form



Compact Mediation Training Project

Section 1 Personal Information

First Name	Surname		
Address:	Telephone:		
	Email:		
Postcode:			
Current Job Title/Role			
Name of Employing Organisation (if applicable)			
Type of Organisation Employed by:	Third Sector <input type="checkbox"/>	Statutory <input type="checkbox"/>	Other <input type="checkbox"/>
Employers Name and Address for Correspondence:			
Address:	Telephone:		
	Fax:		
Postcode:	Email:		
Is the organisation mentioned above signed up to the Wolverhampton Compact or the Dudley Compact?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>

Section 2 Training Course Availability

Can you commit to 5 full days training (8.30am to 6.00pm) in March/April 2010; where **attendance on all days is a requirement of the accreditation**? There will be a block of 2 days and then a block of 3 days training together. Working dates 24, 25 March; April 14, 15, and 16.

Are you available for the whole period of training?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
A requirement of attending the course is to carry out 16 hours of reading preparation in the month before it starts. Are you prepared to do this?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Three written assignments need to be completed after the course. Are you prepared to do this?	Yes <input type="checkbox"/>	No <input type="checkbox"/>

Section 3 Suitability for the Role (*Please use a separate sheet if needed.*)

3.1 What is your understanding of the proposed role of the Volunteer Compact Mediator?

3.2 Please explain why you think you are suitable for the role of Compact Mediator.

3.3 Do you have experience working in or with the voluntary and community sector?
Please give an example.

3.4 Do you have recent experience of working in or with the public/statutory sector?
Please give an example.

3.5 List three issues that voluntary and community organisations and the public sector face, regarding the compact, when working together in the current climate to deliver public services.

1

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3.6 How well do you understand the compact?

3.7 What is your current knowledge and experience of mediation.

3.8 Have you undertaken any training, education or other learning in the last 2 years? How do you view the prospect of an intensive course where days are 8.30 am to 6pm and where the trainers use an experiential style.

3.9 What is your personal experience of voluntary work? Relate your answer to the proposed role of volunteer compact mediator.

3.10 Explain your motivation to meet the commitment to carry out up to 2 compact mediations each year for two years (following completion of the training).

3.11 What experience do you have of managing processes that involve people?

3.12 Write a personal statement about your commitment to equal opportunities and diversity.

3.13 Write a short personal statement about your commitment to supporting good relationships between third sector and public sector organisations in Wolverhampton and or Dudley.

Section 4 Reasons for Applying (*Please use a separate sheet if needed*)

Please use this space to tell us why you wish to apply to become a Volunteer Compact Mediator.

Section 5 Declaration by Applicant - Please tick A or B or C or D below, and sign the declaration

- A I live in Wolverhampton or Dudley and I agree to pay the fee of £2850
- B I live in the ABCD area of Wolverhampton and I apply for a free place
- C My employer has agreed to pay the fee of £2850
- D We will split the cost: Applicant £..... Employer £.....

I declare that the information contained in this application form is to the best of my knowledge, true.

Signature _____

Print Name _____ Date _____

Section 6: Employer Declaration

Compact Mediation Training Project

TO BE COMPLETED BY THE EMPLOYING ORGANISATION

This section should be completed by the Chief Executive Officer (or equivalent senior post holder). If the applicant is the senior post holder then a trustee/board member should complete this section.

Job Title/Role	Employer Organisation Name
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Relationship to applicant (eg line manager; trustee; director etc)

Declaration – please tick relevant boxes

- | | |
|--------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> | I consider the applicant to have the necessary knowledge skills and experience to attend the training for the role of Volunteer Compact Mediator. |
| <input type="checkbox"/> | I confirm that the applicant is able to attend all five days of the course, and make a commitment to 16 hours reading prior to the course. |
| <input type="checkbox"/> | I recognise that attendance on five full days is one of the requirements for accreditation and I/we will enable the applicant to attend by making additional arrangements if necessary. |
| <input type="checkbox"/> | Should the applicant be successful, and move into the role of volunteer compact mediator, we agree in principle to allow them to carry out up to two compact mediations a year, in the two years following the completion of the training. |
| <input type="checkbox"/> | Applicant is a resident in ABCD area and I/we apply for a free place |
| <input type="checkbox"/> | I/we agree to pay the fee of £2850 |
| <input type="checkbox"/> | We agree to split the cost: Applicant: £..... Employer £..... |

Name _____	
Job title/Role _____	
Signature _____	Date _____
Telephone: _____	email: _____

'Please return the form as soon as possible but in any case before 11 February 2010 to Kath Pye, WVSC, 16 Temple Street, Wolverhampton, WV2 4AN. Tel 01902 328 977. Email: kp@wolverhamptonvsc.org.uk