GUIDELINES FOR SPONSOR'S PETITION
ALTERNATIVE DISPUTE RESOLUTION - RULE 114
COURSE APPROVAL PETITION

PREVIOUSLY APPROVED COURSE

Legal Counsel Division
Alternative Dispute Resolution Program
135 Minnesota Judicial Center
25 Rev. Dr. Martin Luther King Jr. Blvd.
St. Paul, Minnesota  55155-1500
(651) 297-7590
**BASIC EDUCATION**

Under the Minnesota Rules of General Practice only those individuals who meet the training requirements in Rule 114 shall be listed on the roster of qualified neutrals. Legal Counsel Division (LCD) certifies the training programs which meet the training criteria. Any sponsor (agency, organization, or person) who provides training may seek course certification. A list of certified training programs is kept by LCD.

**CONTINUING EDUCATION**

Rule 114 requires neutrals to complete continuing education about alternative dispute resolution subjects. Continuing education courses *do not* have to be certified. Neutrals who are on a facilitative/hybrid panel are required to take 18.00 hours per three-year reporting period. Neutrals who are on any of the other panels are required to take 9.00 hours per three-year reporting period. Neutrals who are on more than one panel are required to take no more than 18.00 hours per three-year reporting period.

**APPLICATION REQUIREMENTS**

1. Course certification is based on Rule 114 of the Rules of General Practice.

2. The number of hours certified will be based on each contact hour of training. A contact hour shall consist of no less than a sixty minute class session. The number of hours certified will not include time spent on meals, breaks, homework assignments, or unrelated activities.

3. Course must have been previously approved and any differences between the original course and this course must by explained in this petition.
COURSE INFORMATION

Course Title: _______________________________________________

Date(s): _____________________________________________

Location: ____________________________________________

Sponsor: ______________________________________________

Coordinator: __________________________________________

Address: ______________________________________________

City/State/Zip: __________________________________________

Telephone: ___________________________ Fax: ________________________

Email: _________________________________________________

☑ I agree to receive a signed, scanned, copy of the approval.

INSTRUCTION HOURS

__________Total number of instruction hours (60 minutes of instruction = 1 credit hour)

PREVIOUS APPROVAL INFORMATION

Course Title (if different from above): ________________________________

Date course was originally offered: _________________________________

Course was approved as: _____ Basic Education (qualifies participants for neutral rosters)

_____ Continuing Education

COURSE OUTLINE

Include a course agenda/brochure with this completed form only if different from course
previously approved. A course agenda should indicate the time allocations and subject matter of
each segment of the course.
COURSE CONTENT

Indicate any changes in this offering that would make it different from the original offering. (If changes are significant, a new petition will be necessary.)

________________________________________________________________________________________

Petitioner's Signature    Date

DIRECTIONS: Complete this form and send it with supporting materials to:

Legal Counsel Division
Alternative Dispute Resolution Program
135-D Minnesota Judicial Center
25 Rev. Dr. Martin Luther King Jr. Blvd.
St. Paul, Minnesota  55155-1500

This form will be returned to applicant after LCD review.
The following section will be completed to indicate whether the course is certified.

DO NOT WRITE BELOW LINE - FOR USE BY LCD

_____Approved for credit hours of training for:

_____ Civil Facilitative   _____ Family Facilitative   _____ Continuing Education
# of credits # of credits # of credits

_____ Civil Adjudicative   _____ Family Adjudicative
# of credits # of credits

_____ Family Evaluative
# of credits

_____ Domestic Abuse Issues
# of credits

_____Not approved for the following reason(s): _______________________________________________________
________________________________________________________________________________________

____________________________________________________________ __________________

Renee Salmon, Legal Counsel Division                                                              Date
Alternative Dispute Resolution Program