

## RMAB Checklist

I, \_\_\_\_\_ (name), \_\_\_\_\_ (position)  
of \_\_\_\_\_ (organisation) certify the following:

i)	I am the senior officer for the organisation or am authorised by the organisation to certify the matters herein.	<input type="checkbox"/>
ii)	The organisation has more than ten mediator members accredited under the National Mediator Accreditation System.	<input type="checkbox"/>
iii)	The organisation provides a range of member services such as, an ability to provide access to or refer mediators to ongoing professional development workshops, seminars and other programs and debriefing, or mentoring programs.	<input type="checkbox"/>
iv)	The organisation has a complaints system that meets Benchmarks for Industry-based Customer Dispute Resolution or is able to refer a complaint to a Scheme that has been established by Statute.	<input type="checkbox"/>
v)	The organisation has sound governance structures, is financially viable and has appropriate administrative resources.	<input type="checkbox"/>
vi)	The organisation has sound record-keeping in respect of the approval of practitioners and the approval of any in-house, outsourced or relevant educational courses.	<input type="checkbox"/>
vii)	The organisation has the capacity and expertise to assess training and education that may be offered by a range of training providers in respect of the training and education requirements set out in these standards.	<input type="checkbox"/>

For these reasons, the organisation is qualified for membership of the National Mediator Accreditation Committee as a Recognised Mediator Accreditation Body (RMAB).

\_\_\_\_\_  
Signature

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

*Once completed, please forward it to the NADRAC Secretariat by 16 March 2009.*