

Application to become an AMDRAS Recognised Provider: Registered Accreditation Provider (RAP) pursuant to the AMDRAS Standards Part 6 Clauses 66-71.¹

Full name of Organisation making application:

and Trading Name (if different):

Website Address:

Address of Organisation making application

Street Address:

City:

State:

Postcode:

Name of Authorized Representative:

If contact details are different to above, please provide these here

Phone:

Email:

Is the organisation a member of the MSB or AMDRAS?²

Yes

No

If your answer to the previous question is "Yes", how
many registered practitioner members do you have?

<100

>100

If your answer to the previous question is "No", this application will also become an application for
membership of Australian Mediator and Dispute Resolution Accreditation Standards Board Limited,
ACN 145 829 812 (the company)

Complete the following application form, which will be submitted via email.

Supporting documents can be attached when this form is submitted.

The RAP logo (where available) must also be attached when this form is submitted.

¹ Please see Clause 3c of the Transition Rules:

- c. All NMAS RMAB's will become Recognised Accreditation Providers:
 - i. until the Transition Date; and
 - ii. without having to meet the requirements prescribed by Part 6 of AMDRAS.

² If your organisation is not a financial member of AMDRAS you will need to seek approval from the Board to become a member. **You can use this application to become a financial member.**

Application Questions

Complete the following Application Form, being certain to respond to each substantive question.

1. Requirements for authorisation as RAP

- | | | |
|---|------------|-----------|
| 1.1 Do you have in place sound governance structures, financial viability and appropriate administrative resources to administer the accreditation of registered practitioners (including for data-collection and retention)?
If so, please provide details. | Yes | No |
|---|------------|-----------|

- | | | |
|--|------------|-----------|
| 1.2 Do you have in place systems or mechanisms for meeting your obligations under the Training and Assessment Framework (TAF)?
If so, please provide details. | Yes | No |
|--|------------|-----------|

2. Complaints-handling

- | | | |
|---|------------|-----------|
| 2.1 Can you provide evidence that you have in place a complaints handling policy that meets the minimum requirements set out in the AMDRAS model policy in Appendix 5, or an exemption as provided for in section 66. | Yes | No |
|---|------------|-----------|

- | | | |
|---|------------|-----------|
| 2.2 Can you provide evidence of ongoing compliance with a complaints-handling policy that meets the minimum AMDRAS requirements expected, when requested to do so by the Board? | Yes | No |
|---|------------|-----------|

- | | | |
|---|------------|-----------|
| 2.3 Can you provide a de-identified summary of the number and type of complaints that you have received as a Recognised Provider and in regards to any Registered Practitioners accredited with you, at the end of each financial year or upon request of the Board for a specified period? and
If you cannot fulfill the requirements set out above, please provide a brief explanation | Yes | No |
|---|------------|-----------|

- 2.4 Have you sought:

- | | | |
|--|------------|-----------|
| (i) the approval of the Board of a different complaints-handling policy that meets the minimum requirements? | Yes | No |
|--|------------|-----------|

- | | | |
|---|------------|-----------|
| (ii) an exemption from the Board that you be required to provide an approved complaints-handling policy in regards to certain or all Registered Practitioners accredited with you? and/or | Yes | No |
|---|------------|-----------|

(iii) an exemption from the Board that you be required to comply with s66.2(c)(ii), 80 and/or 81 of the AMDRAS? ³	Yes	No
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3. Additional requirements for authorisation as a RAP

(Note the requirement to determine whether applicants meet the requirement under the Training and Assessment Framework (TAF) for movement between levels of accreditation can be satisfied by requiring applicants to provide to the RAP in the appropriate terms that they have satisfied the accreditation and/or renewal requirements.)

3.1 Do you have the capacity and expertise to set up processes to find whether applicants meet the requirements under the TAF for movement between levels of accreditation? Please provide details	Yes	No
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3.2 Do you have the capacity and expertise to set up processes to find whether applicants meet the requirements under the TAF for renewal of accreditation? Please provide details	Yes	No
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3.3 Do you have the ability to provide or refer Registered Practitioners to CPD activities? Please provide details	Yes	No
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3.4 Do you have systems and mechanisms in place to meet your AMDRAS obligations? Please provide details	Yes	No
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³ AMDRAS Part 6, s66.2(d) states 'Exemptions under s66.2(b) may be granted (i) where the Board is satisfied that all Recognised Practitioners are subject to complaints-handling policies and processes that meet or surpass the minimum requirements, including those imposed by legal and regulatory regimes; and/or (ii) with or without conditions approved by the Board.'

⁴ See AMDRAS Part 4 Training and Assessment Framework

3.5 Do you have at least 10 Registered Practitioners accredited under the TAF, who are bona fide members of the Applicant Organisation, or panellists or employees of the Applicant Organisation? **Yes** **No**
Please provide details

Name	Email	Role
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4. Additional responsibilities of RAPS

4.1 Do you have in place systems to remind Registered Practitioners for whom you are responsible of the date on which their accreditation is due for renewal? **Yes** **No**
Please provide details

4.2 Do you have in place systems to update and maintain the National Register, including by uploading to the National Register, in the manner required by the Board, the particulars of the Registered Practitioners the RAP has accredited? **Yes** **No**
Please provide details

4.3 Do you have in place systems to notify the Board of the names of Registered Practitioners who have not had their accreditation renewed (no later than two months after the accreditation expiry)? **Yes** **No**
Please provide details

4.4 Do you have in place systems to notify the Board of the names of Registered Practitioners who have been granted leave of absence or issued a non-practicing certificate? **Yes** **No**

Please provide details

4.5 Do you have in place systems to notify the Board of the names of Registered Practitioners whose accreditation has been suspended or cancelled? **Yes** **No**

Please provide details

4.6 Do you have in place the following processes to ensure that if a Registered Practitioner wants to transfer their registration from one RAP to another, both RAPs involved ensure that the Registered Practitioner:

(i) confirms in writing their request to transfer; **Yes** **No**

(ii) provides evidence of accreditation by the other RAP, including supplying a copy of their application for accreditation or most recent renewal application; and **Yes** **No**

(iii) the RAP being requested to take over as the accreditation notify the board and the other RAP of the proposed date that the transfer is to take effect. **Yes** **No**

(iv) the RAP being requested to take over the accreditation does not collect the accreditation fee from the Registered Practitioner until their next renewal falls due. **Yes** **No**

Please provide details

4.7 Do you have in place systems to ensure that you pay to the Board the National Register registration fee collected from Registered Practitioners you accredit? **Yes** **No**

Please provide details

4.8 Do you have in place systems to ensure that you keep confidential the National Register login identity, password, and other related information issued by the Board? **Yes** **No**

Please provide details

5. No doubling-up of accreditation

(Note: nothing in AMDRAS prevents a RAP from including, on its internal list or panel of Registered Practitioners, a Registered Practitioner accredited by another RAP).

5.1 Do you have in place systems to ensure that where a Registered Practitioner has already been accredited under AMDRAS by another RAP, you must not:	Yes	No
(i) accredit that Registered Practitioner (including during a period of leave of absence)	Yes	No
(ii) upload details of that Registered Practitioner to the National Register	Yes	No
(iii) collect the National Register registration fee from that Registered Practitioner.	Yes	No

Please provide a brief explanation.

6. Recognition of current accreditation by another RAP

6.1 Where you are required to recognise the accreditation of a Recognised Practitioner who is currently accredited under the AMDRAS by another RAP do you have in place systems that require the Registered Practitioner to provide evidence of accreditation by the other RAP, including by supplying a copy of their application to that other RAP?	Yes	No
6.2 Where you are required to recognise the accreditation of a Recognised Practitioner who is currently accredited under the AMDRAS by another RAP do you have in place systems that require the Registered Practitioner to give permission to the other RAP (and its delegate, if relevant) to disclose AMDRAS-related information; and	Yes	No
6.3 Where you are required to recognise the accreditation of a Recognised Practitioner who is currently accredited under the AMDRAS by another RAP do you have in place systems that require the Registered Practitioner to disclose any complaints made to the Board or a RAP about their practice?	Yes	No
6.4 Where you are not satisfied with the any of the evidence provided by the Registered Practitioner do you have systems in place to refer the Registered Practitioner to their accrediting RP and/or require the Registered Practitioner to complete additional CPD and/or practice hours?	Yes	No

7. Other

What else could you say about your application which may be relevant?

8. Authorisation

The Applicant acknowledges that admission as a member of the Company is at the discretion of the board. If admitted as a member of the Company, the Applicant agrees to be bound by the Company's constitution, to pay any membership fees associated with the class of membership for which it is applying and to a member's liability of \$10.

Signature:

Date:

Authorised Signatory:

Additional documentation to be attached to the email during the submission

The Organisation's Complaint handling process

The Organisation's logo (where available)