



Approval of Dispute Resolution Program – Instructions

1. This form should be submitted for consideration of becoming an approved dispute resolution program under the Dispute Resolution Act (K.S.A. 5-501 *et seq.*) and pursuant to Supreme Court Rule 913.
2. Organizations and individuals may be approved as a dispute resolution program.
3. Approval is granted on an annual basis. An application for renewal must be completed each calendar year to remain active.
4. Each approved program must submit an annual report with their application and renewals. The report must include requirements of Supreme Court Rule 913(d)(1)(A) and include:
 - a. The number and types of cases handled in the calendar year; and
 - b. show continued compliance with the Dispute Resolution Act.
5. The director shall approve or disapprove each application by the end of the second meeting of the advisory council occurring after the date the application was submitted (K.S.A. 5-507(b)).
6. Notice of approval will be emailed to the program.
7. Completed applications (and any attachments) should be submitted to the Director of Dispute Resolution via mail to:

Office of Judicial Administration
301 SW 10th Avenue
Topeka, KS 66612-1507
adr@kscourts.org

Required Attachments:

- Plan for the operation of the program or service.
- Program or individual's objectives.
- Administrative organization of the program or service.
- Recordkeeping procedures.
- Procedures for client intake and for scheduling, conducting, and terminating dispute resolution sessions.
- Qualifications for neutral persons associated with the program.
- Annual budget.
- Sliding scale for assessing fees for dispute resolution services (K.S.A. 5-508).
- Annual report.
- A non-refundable \$50.00 application fee.

INCOMPLETE APPLICATIONS WILL BE RETURNED WITHOUT REVIEW

For Office Use Only		
Approved	Denied	Date of Decision
<input type="checkbox"/>	<input type="checkbox"/>	

Approval of Dispute Resolution Program – Application

Part A: Program Information (Required on all applications)

Program Name: _____

Contact Name: _____

Address: _____

City, State, Zip: _____

Phone: _____

Email (*Required*): _____

Part B: Services, Courses or CDRE Provided by the Program (Required on all applications)

Types of dispute resolution:

Approved primary training courses:

Approved practicum:

Approved CDRE activities/presentations:

Part C: Neutral Persons Associated with the Program or Service

Name	Qualifications Attached
_____	<input type="checkbox"/> Yes <input type="checkbox"/> On File with OJA
_____	<input type="checkbox"/> Yes <input type="checkbox"/> On File with OJA
_____	<input type="checkbox"/> Yes <input type="checkbox"/> On File with OJA
_____	<input type="checkbox"/> Yes <input type="checkbox"/> On File with OJA
_____	<input type="checkbox"/> Yes <input type="checkbox"/> On File with OJA
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_____	<input type="checkbox"/> Yes <input type="checkbox"/> On File with OJA
_____	<input type="checkbox"/> Yes <input type="checkbox"/> On File with OJA
_____	<input type="checkbox"/> Yes <input type="checkbox"/> On File with OJA
_____	<input type="checkbox"/> Yes <input type="checkbox"/> On File with OJA

(Please list any additional personnel on a separate page.)

Part D: Verification

I certify that all information I have supplied in applying for program approval is true and complete. I agree, individually and on behalf of the program named in this application, (1) to uphold the Kansas Supreme Court Rules Relating to Dispute Resolution; (2) to assure that my or the program's approved training courses or approved CDRE presentations will meet the requirements of Supreme Court Rule 914 or Supreme Court Rule 916, respectively; (3) to submit myself or the program I represent to periodic supervision and evaluation, and release any information concerning such supervision or evaluation to the Director of Dispute Resolution while I am serving as an approved program or representing an approved program. In addition, I understand that to gain and maintain approval, I must provide a program annual report to the Director of Dispute Resolution each calendar year.

Program Representative Name (Print)

Program Name (Print)

Signature

Date