

Mediator Compliance Declaration

Name			
Address			
e-mail			
Direct Dial number			
Mobile number			
Preferred method of contact	email	DDI	mobile
INSURANCE Current insurance as a Mediator?	Yes	No	
Expiry date? Limit of liability?			
Insurer Policy number			
PRACTICE AND CPD			
Time spent lead mediating in last 12 months	days		
Number of hours CPD in last 12 months	hours		
Compliance with EU Code of Conduct?	Yes	No	
If no, which Code of Conduct do you observe? (You may be asked for a copy)			
REPRESENTATIONS			
Do you warrant that the CV submitted to Consensus, and as it now appears on the Consensus website, fairly reflects your qualifications and experience such that its accuracy may be relied upon as a contractual term?	Yes No If "no", please explain why, and how it may be remedied:		
Signature			
Date			