APPLICATION FOR ADMISSION TO REGISTERY OF MEDIATORS QUALIFIED UNDER FLORIDA NORTHERN MORTGAGE MODIFICATION MEDIATION PROGRAM

1. Name:		
2. Address:		
City:	State:	Zip:
3. Phone:	4. Email:	
5. Date certified as a Florida Su Proof of certification atta	preme Court Certified Circuit Court Mediator: ached	
6. Date completed training cou in bankruptcy proceedings:	urse of at least eight (8) additional hours focused	on modifying residential mortgages f completion attached.
7. I agree to accept two (2) mo parties cannot pay the medi	rtgage modification mediation assignments per ation fee.	calendar year when one or more of the
	ations for membership to the Florida Northern m 20 and that the foregoing statements are true ar	
 Date	Signature	

YOU MUST attach appropriate proof of certification and training completion in conjunction with items 5 and 6.

Mail to:

FLNB Mediation Coordinator United States Bankruptcy Court 110 East Park Ave., #100 Tallahassee, FL 32301