

ARKANSAS ALTERNATIVE DISPUTE RESOLUTION COMMISSION

Application For Accreditation Of Continuing Mediation Education (CME) Activity

PROGRAM INFORMATION

1. Sponsor/Organization: _____
2. Email: _____ Phone: _____
3. Address: _____
4. Suite: _____ P.O. Box: _____
5. City/State: _____ Postal Code: _____
6. Program Title: _____

7. Length of Program: _____ Hours Requested: _____
8. Date(s) of Program: _____
9. Program Location: _____
10. Place "X" on applicable line: In-Person Live Webinar On-demand (recorded) Webinar

Supporting Documents Required:

Speaker Bio Program Agenda/Time Schedule Certificate of Attendance (if applicable)

Supporting Documentation Provided:

YES NO

CME Requirements may be found at the following link:

<https://www.arcourts.gov/administration/adr/rules>

Submit Application To:
Arkansas Alternative Dispute Resolution Commission
Attn: ADR Coordinator
Justice Building
625 Marshall Street
Little Rock, AR 72201
E-mail: adrcommission.cme@arcourts.gov

If you have any questions, please call us at (501) 682-9400.