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**Application Form for HICMC Mediators**

**Applicant Name:**

**Date of Application:**

**NOTICE**

1. Where □ is selected, please leave a tick √ in the box □。
2. When submitting the application form, please provide any relevant educational, professional or technical certificates. Please include a recent colour, borderless two-inch photograph of yourself.

3. Please complete either of the following to submit your application:

1. Send via e-mail: Please attach **this word document**, alongside **relevant certificate materials** and **your photo** into a compressed .zip file, with the .zip file titled with your name, and send to the following e-mail address: **Hicmc\_hq@163.com.**
2. Send via post: Please send the signed original copy, along with the above documents, to the following address: Qin’ao International Legal Services Building, 8/F, Songqin Building Block 9, No.2333 Gang’ao Avenue, Guangdong-Macao In-depth Cooperation Zone in Hengqin

4. Where you wish to make any amendments, or have any relevant suggestions or matters, please contact us.

**Contact Details:**

Ms. Mai, Phone No.: +86 19180923602

Mr. Xu, Phone No.: +86 18529625177

**Applicant’s Basic Information**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Applicant Name  （Chinese/English） |  | Sex |  | Photograph  （Two Inches） |
| Date of Birth |  | Nationality |  |
| City of Residence |  | Political Affiliation | (Only applicable for residents of the PRC） |
| Identity Document Type |  | Identity Document Number |  | |
| Highest Level of Educational Achievement |  | Industry |  | |
| Academic History |  | Employment Condition | □ Employed □ Non-employed | |
| Work  Unit / Division |  | Position/  Professional Post |  | |
| Duration of professional qualification certification  training |  | Professional Title | E.g.:Lawyer / Teacher / Senior Accountant /  Senior Engineer | |
| Numbers of Years in Practice |  | | | |
| Societal post or if served as a mediator in other mediation institutions, or as an arbitrator in arbitration institutions (please specify) |  | | | |
| Working Language | □ Mandarin □ Cantonese □English   □ Other foreign language(s) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ （Please fill in） | | | |
| Specialty of  Practice | □ Property □ Projects and Construction □Intellectual Property  □ Finance □ Tort □ Maritime  □ Insurance □ Equity Investment □ Trade  □ Company Management □ Other \_\_\_\_\_\_\_\_\_\_\_\_\_ （please fill in）  Note：Please select three fields of specialty at maximum. | | | |
| Mediation Work Experience | Note：please state the length of mediation work and number of completed mediation cases， which can be attached | | | |

**Means of Contact[[1]](#footnote-0)﹡**

|  |  |  |  |
| --- | --- | --- | --- |
| Office Address |  | Residential Address |  |
| Office Number |  | Phone Number |  |
| Post Address |  | E-mail |  |
| Fax (if relevant) |  | Landline Telephone (if relevant) |  |
| WeChat Code |  | QQ Code |  |
| Primary Means of Contact | □ Office Address □ Residential Address  □ Phone Number □ E-mail □ WeChat | | |

**Educational History（Please attach academic certificates，starting from university）**

|  |  |
| --- | --- |
| Start and End Date | College and Major |
|  |  |
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**Work Experience**

|  |  |
| --- | --- |
| Start and End Date | Office and Position |
|  |  |
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**I GUARANTEE**

that the above content is true, and to bear appropriate responsibility for

any inaccuracies.

**Applicant Name：**  **Date：**

1. ﹡ Note: This section is extremely important for us to communicate with you. Please contact our Mediation Secretary if there is any change, so the HICMC can communicate with you as soon as possible. [↑](#footnote-ref-0)