

**Database**  
**Network of Practitioners and Resource Persons**  
**Mennonite Conciliation Service**  
**A Peace and Justice Ministry of Mennonite Central Committee U.S.**

**Description:**

A computerized listing of Christian conflict resource persons in the US which MCS maintains for the purposes of networking, resourcing and linking callers with potential practitioners. MCS does not sponsor, accredit or assume any professional responsibility for referrals made or work performed in relation to practitioners other than its own staff.

**Criteria:**

Those wishing to be listed in the database must be a self-defined practitioner or resource person, commit to the MCS Philosophy of Practice and submit a fully completed application form. (MCC US is an agency of the Mennonite, Mennonite Brethren and Brethren in Christ churches).

**Referrals:**

Referral suggestions will be given based on needs identified by the inquirers and other criteria which they may specify, such as area of expertise, geographic region or church conference affiliation. A data sheet on each practitioner will be provided along with the Guidelines for Selecting a Conflict Resource Person. It is the sole responsibility of the inquiring individuals or organizations to evaluate, select and ultimately contract with any referral name in the MCS database.

**Updates:**

MCS will request a periodic update of each listing. However, it is the responsibility of the practitioner to notify MCS staff of any changes.

MCS reserves the right to maintain the database and make referrals according to the needs of our constituency.

*Please fill out the following application in its entirety to be entered into the MCS database.  
Return the form to*

*Mennonite Conciliation Service  
21 S. 12th Street, PO Box 500  
Akron, PA 17501-0500.*

**Mennonite Conciliation Service**  
**Network of Practitioners and Resource Persons**  
**Database Application**

**Personal Information**

First Name: \_\_\_\_\_ MI: \_\_\_\_\_ Last: \_\_\_\_\_

Gender:  F  M

Race/Ethnicity:

African American

Caucasian

Native American

Asian American

Hispanic

Other: \_\_\_\_\_

Denominational Affiliation: \_\_\_\_\_

Conference or District: (If applicable) \_\_\_\_\_

Primary Occupation: \_\_\_\_\_

Base of Operation (indicate all that are primary):

Academic Institution

Congregation/Conference

VORP Program

Community Mediation  
Center

Private Practice

Other: \_\_\_\_\_

Religious Organization

Languages in which you are able to provide your services: \_\_\_\_\_

Open to travel:

Locally

In-state

Regionally

Nationally

Professional Credentials/Memberships (include relevant degrees, licenses, accrediting bodies): \_\_\_\_\_

Fees: \_\_\_\_\_

**Contact Information**

Organization Name, if applicable: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

## Areas of Practice

Check all that apply.

**Interpersonal Mediation:**  Yes  No

Area(s) of Specialization:

- |   |  |                                       |
|---|--|---------------------------------------|
| <input type="checkbox"/> Children/Youth | <input type="checkbox"/> Divorce/Child Custody | <input type="checkbox"/> Workplace    |
| <input type="checkbox"/> Church-related | <input type="checkbox"/> Family                | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Community      | <input type="checkbox"/> VORP/Criminal Justice | <input type="checkbox"/> Arbitration  |

Experience (Hours of direct intervention):  0-50  50-100

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**Group Process Facilitation:**  Yes  No

Area(s) of Specialization:

- |   |   |                                       |
|---|---|---------------------------------------|
| <input type="checkbox"/> Community      | <input type="checkbox"/> Organizational | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Congregational | <input type="checkbox"/> Youth          |                                       |

Experience (Hours of direct intervention):  0-50  50-100

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**Group Conflict Intervention:**  Yes  No

Area(s) of Specialization:

- |                                    |   |   |              |
|------------------------------------|---|---|--------------|
| <input type="checkbox"/> Community | <input type="checkbox"/> Congregational | <input type="checkbox"/> Organizational | Other: _____ |
|------------------------------------|---|---|--------------|

Experience (Hours of direct intervention):  0-50  50-100

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**Education/Resourcing:**  Yes  No

Type:

- Presentation  Workshop/Christian Ed  Other:\_\_\_\_\_
- Sermon

Content:

- Conflict Transformation  Race  Urban Peacemaking
- Gender  Restorative Justice  Other:\_\_\_\_\_

**Training:**  Yes  No

Audience:

- Academic  Professional  Youth  Other:\_\_\_\_\_
- Community  Secular

Content:

- Anti-racism  Group Facilitation  Organizational Consulting
- Anti-sexism  Multicultural Mediation  Peer Mediation
- Basic Mediation  Negotiation/Problem-solving  VORP
- Communication Skills  Nonviolence Other:\_\_\_\_\_
- Divorce Mediation

## Previous Training/Experience Received

Relevant training received (Name of training, trainer, date):

Relevant Professional Experience:

Relevant cross-cultural experience:

Name and contact info for several references who would be willing to take calls from potential clients:

Anything else that would be helpful to know about you or your work:

*Return the completed form to MCS, 21 S. 12th Street, PO Box 500, Akron, PA 17501-0500.*