



### CONFIRMATION OF PRACTICUM /MENTORSHIP EXPERIENCE

This is to confirm that \_\_\_\_\_ has participated  
*(Name of applicant for FMC certification)*

satisfactorily in a practicum or mentorship in separation and divorce family mediation supervised by

me on \_\_\_\_\_ at \_\_\_\_\_  
*(Date) (Location)*

1. Please indicate the applicant's level of completion in each of the following components of the practicum:

At least 20 hours of involvement in actual mediation session, or, with FMC approval, simulated mediation sessions

Comments:

At least 10 hours of consultation with the practicum supervisor

Comments:

The opportunity to progress from observing experienced mediators in mediation sessions, to co-mediating with an experienced mediator, to mediating under supervision

Comments:

2. May we contact you if more information is required?  yes  no

Your name:

Position:

E-mail:

Street Address:

Phone number: Work:

Home:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

This form should be sent directly to Family Mediation Canada. It should not be given to the applicant to send in. Please keep a copy for your records.

The Certification Committee  
Family Mediation Canada  
#180 – 55 Northfield Dr. E.  
Waterloo, ON N2K 3T6

If you have any questions about this form please feel free to contact us at: **Email:** [fmc@fmc.ca](mailto:fmc@fmc.ca)  
**Phone:** (519) 585-3118, or **toll-free:** 1-877-362-2005