



Family Mediation Canada
Médiation Familiale Canada

**CONFIRMATION OF PRACTICUM EXPERIENCE FOR CANDIDATE APPLYING FOR
FMC CERTIFICATION**

This is to confirm that _____
(Name of applicant for FMC certification)

participated satisfactorily in a practicum in family mediation supervised by me on

_____ at _____
(Date) (Location)

Please indicate the applicant's level of completion in each of the following components of the practicum (please initial):

_____ 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: _____

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

Your name: _____ Position: _____

email: _____ Address: _____

_____ Phone: _____

_____ Date _____

Signature

Thank you.

This form should be sent directly to Family Mediation Canada by the Referee.

It should not be given to the applicant to send.

Please send it to: Certification Application, Family Mediation Canada, Box 46003 Quail Ridge PO, Kelowna, BC V1V 0B1

If you have any questions you can contact: Sue Bedier, Administrative Officer, admin@fmc.ca

Phone: 778 674 4362 Toll-free: 1 877 269 2970

Please keep a copy for your records. It is up to you whether you share your reference with the candidate.