



Family Mediation Canada / Médiation Familiale Canada
Box 46003, Quail Ridge PO, Kelowna, BC V1V 0B1

APPLICATION FORM

FOR CERTIFICATION AS

FMC FAMILY RELATIONS MEDIATOR OR

FMC COMPREHENSIVE FAMILY MEDIATOR

Please complete this form for one of the above designations

1. Applicant information (to be listed on website, unless otherwise specified):

Name: _____

Organization: _____

Address: _____

Phone: _____ email: _____

Occupation: _____

Membership and qualifications in any other related organizations: _____

Brief description of the professional context of your mediation practice: _____

Family mediation experience: _____

Number of family mediations completed: 0-10 10-25 26-100 over 100

2. Curriculum vitae: Please attach your curriculum vitae outlining your education and professional qualifications and achievements.

3. Family mediation training: Please complete either Chart a, or b (following pages). Attach extra pages if necessary.

(a) for Family Relations Mediator

Subject areas	Hours required	Courses	Trainer(s)	Hours	Date taken
<u>(A) Basic training:</u> Basic conflict resolution and mediation theory education and skills training, including intercultural training	At least 80				
<u>(B) Additional Training:</u> Further related education and training	At least 100 including the hours below				
- Family Dynamics of separation and divorce	At least 35				
- Family and child law:	At least 14				
- Power imbalance and dynamics and effects of abuse	At least 21				
- Financial Issues including support	At least 7				
- Ethical Issues	At least 7				
- Drafting Agreements	At least 7				
Other elective hours					
Total hours A + B					

(b) for Comprehensive Family Mediator

Subject areas	Hours required	Course	Trainer(s)	Hours	Date taken
<u>(A) Basic training:</u> basic conflict resolution and mediation theory education and skills training including intercultural training	At least 80				
<u>(B) Additional Training:</u> further related education and training	At least 150 hours including hours below				
- Family Dynamics of separation and divorce	At least 35				
- Child Law	At least 21				
- Power imbalance and effects of abuse	At least 21				
- Legal and Financial Issues	At least 42				
- Ethical Issues	At least 7				
- Drafting Agreements	At least 7				
Other elective hours					
Total A + B					

4. Proof of Practicum/Mediation Experience

Please complete either section (a) or (b), depending on your mediation experience:

a) Experienced Mediator

If you are applying as an experienced mediator you must meet the following criteria:

- i) 2 years experience as a family mediator doing separation and divorce;
- ii) have completed a minimum of 10 cases (at least 80 hours) with clients around separation and divorce;

and you must provide:

- i) two Memoranda of Understanding or Agreements that you have authored for your clients at the conclusion of mediation around separation and divorce. Please remove all identifying features (names of clients, addresses, birthdates, file numbers) prior to sending the copies of the documents to us;
- ii) two letters of reference on the approved reference form. These cannot be client references.

b) New Mediator

If you are applying as a new mediator because you don't meet the requirements in part (a), please provide:

- i) proof of practicum completed as set out in Section 5.7 of the FMC Standards (please attach your certificate of completion from your practicum placement);
- ii) three letters of reference on the approved reference form (one may be from your practicum supervisor/mentor).

5. If you have completed your training and have practiced for more than one year, please *specify* the 20 hours of continuing family mediation education you completed last year. *If your original basic mediation training is more than five years old, please specify the continuing education completed over the last three years. Please note the requirement that at least 14 hours of continuing education in the last three years must be conflict resolution and/or mediation skills training.* Indicate dates, trainers, institutions and duration.

6. List any disciplinary actions taken against you by any professional association(s). Include date, name of professional body, type of disciplinary action and result.

7. List any ethical difficulties or criminal convictions relevant to a family mediation practice.

8. Names of people who will complete your reference forms:

i.

ii.

iii. (for new mediators)

9. Specify any matters that might affect negatively the general public's perception of your ability to adhere to FMC's Code of Professional Ethics.

10. Provide proof of liability insurance coverage (by self or employer).

CONFIDENTIALITY

Subject to the right of Family Mediation Canada to release, for educational or research purposes, certification assessment documents, data and information that does not identify me personally, I understand and agree that only Family Mediation Canada, the Certifying Administrator or his/her designate and the Certifying Assessors of Family Mediation Canada shall retain certification records that identify me personally. Unless I give my consent in writing, assessment material submitted by me for certification and test results may only be released by FMC for educational and research purposes after information identifying me personally has been removed.

Name

Signature

Street Address

City

Province/Territory

Postal Code

Signed this _____ day of _____, _____.

For office use only: FMC Certifying Administrator _____ Date _____

RELEASE

I hereby give my consent in writing allowing Family Mediation Canada to use, for non-profit educational or research purposes, the assessment documents and video tapes submitted by me even though I am personally identified.

Name

Signature

Street Address

City

Province/Territory

Postal Code

Signed this _____ day of _____, _____.

For office use only: FMC Certifying Administrator _____ Date _____

STATUTORY DECLARATION

I hereby certify that I am a member in good standing of Family Mediation Canada and that I adhere to the standards set out in the FMC Practice, Certification and Training Standards and the FMC Code of Ethics.

I hereby swear or affirm that the information in this application form and its attachments is true and correct.

I give my consent to the Certification Administrator(s) to inquire about any professional disciplinary actions and/or criminal convictions recorded against me.

SWORN BEFORE ME at

_____)

in the Province of _____)

_____)

this _____ day of _____, 20 _____)

_____)

_____)

Commissioner for taking Affidavits)

for the Province/Territory of _____)

(Signature)

PLEASE PRINT THIS FORM, SIGN AND DATE IT, AND MAIL IT TO:

Family Mediation Canada

Box 46003, Quail Ridge PO, Kelowna, BC V1V 0B1

Please keep a copy for your records.

Note: Your application isn't complete until Family Mediation Canada has received all your letters of reference (one from each referee sent under separate envelope), and verification that you have completed the practicum component (if you are a new mediator).

If you have any questions about this form please feel free to contact us at: admin@fmc.ca

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