AFFIRMATION STATEMENT

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CANADA PROVINCE OF ALBERTA TO WIT IN THE MATTER OF *RENEWAL* as REGISTERED FAMILY MEDIATOR: CHILD INCLUSIVE



Alberta, AFFIRM THAT:

I am a Registered Family Mediator: *Child Inclusive* and I am applying to be approved to continue such designation for the current year.

l,______ of _____

- 1. I have completed 20 hours of acceptable continuing education in *Child Inclusive* related topic areas (e.g. mediation, child development, domestic violence, family law issues related to parenting) over the **past two years**. (Waived for 2021, completion is voluntary) Please specify:
- 2. I am currently a member of good standing of the Alberta family Mediation Society (AFMS).
- 3. I am covered and will continue to be covered for malpractice insurance through my liability insurance policy.
- 4. I agree to subscribe to the Members' Code of Professional Conduct approved by the Alberta *family* Mediation Society.
- 5. I have participated in a minimum of 30 hours per year meeting with children and providing feedback to parents/third parties. (For Child Inclusive specializations, these hours can be incorporated into their principal designation training.)
- 6. I agree to cease using the RFM designation, if requested to do so by the Board of Directors of the Alberta *family* Mediation Society.
- 7. I will supply proof of all the above undertakings (where applicable), if requested by the Alberta *family* Mediation Society.
- 8. I authorize the attached 150 words practice description to be published on the AFMS website (or leave as is).

I promise that the contents of this Affirmation Statement are true and complete, and I solemnly affirm that this promise is binding on my conscience.

DECLARED at			
in the Province of Alberta, this			day
of	, 20	BEFORE ME	

Signature of Declarant

Witness Signature (any adult)