

Application Form Registered Parenting Coordinator and Arbitrator (RPCA) Status

General Information

Last Name:		First Name(s)	
Organization:	I		
Address including Postal Code:		ork Phone:	
Email Address:			
Practice Descri	ption (for the website)		
Provide a (max attach.	(150 word) practice description which will b	e published in the A	FMS website directory. Please
Annual fees	General Membership (all members)	\$160	\$
	RPCA Membership (no specialty required) -option, Child Inclusive specialt	\$140 y \$100	\$ \$
OR if applying	as an additional specialty to a current Regis	stered Family Mediat	tor Membership:
		\$100	\$

List your website as a link on your AFMS profile

Website: _____

TOTAL	\$
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Please make cheque payable to "Alberta family Mediation Society"; OR

Visa/MC # _____ *CVV _____

Signature: _____

If possible, please email application and all supporting documents to us at info@afms.ca

Alberta *family* Mediation Society #1650, 246 Stewart Green SW Calgary, AB T3H 3C8 1-877-233-0143

CHECKLIST OF DOCUMENTS TO BE INCLUDED WITH YOUR APPLICATION FOR REGISTERED PARENTING COORDINATOR AND ARBITRATOR (RPCA)

Evidence of Educational Qualifications
Photocopies of Degrees or Certificates
Detailed list of all basic mediation training courses completed
Include date, title of course, hours and course provider for each course completed
Detailed list of all specialized mediation and arbitration training courses completed
Include date, title of course, hours and course provider for each course completed
Copies of 3 Real Mediation Reports and 3 Real Arbitration Awards as per the requirements listed on the AFMS website. (with identifying details omitted)
Evidence of Malpractice Liability Insurance
Photocopy of receipt and/or evidence of current policy
Signed and Commissioned Statutory Declaration
Form(s) attached below (please note, the Child Inclusive Specialty Statutory Declaration is optional and only for those wanting to add the extra specialty to the RPCA status)
Membership Fee (cheque payable to "Alberta family Mediation Society" or credit card information)

STATUTORY DECLARATION

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CANADA
PROVINCE OF ALBERTA
TO WIT

I, ___

IN THE MATTER OF REGISTERED PARENTING Alberta family COORDINATOR AND ARBITRATOR (RPCA) EXPERIENCE AND TRAINING CONTENT REQUIREMENTS

_____ of _____, Alberta,

DO SOLEMNLY DECLARE THAT:

- I have reviewed the Education and Experience requirements for being a Registered Parenting Coordinator and Arbitrator through the Alberta Family Mediation Society ("AFMS").
- I have conducted the number of hours of mediation and arbitration required based on my Educational qualifications as outlined by AFMS.
- I have completed the current minimum required content policy of AFMS for 40 hours of Basic Mediation Training.
- 4) I have completed the current minimum required content policy of AFMS for (if not a lawyer): 20 hours of family law training and 20 hours of Parenting Coordination training, including 3 hours of Domestic Violence training and/or; (if not a mental health professional): 20 hours of child development and 20 hours of Parenting Coordination training.
- 5) I have taken one or more courses that have provided me with an additional 35 hours of training covering of all of the topics listed in the current minimum required content policy of AFMS for Specialized Mediation and Arbitration Training.
- 6) I have completed an additional 35 hours of specialized training in Arbitration which includes a full assessment and writing of an Award.
- I agree to provide the Board of Directors of AFMS with documentation verifying the courses I have taken and their content upon request.
- I agree to subscribe to the Members' Code of Professional Conduct approved by the Alberta Family Mediation Society.

AND I MAKE THIS SOLEMN DECLARATION conscientiously believing the same to be true, and knowing it is of the same force and effect as if made under oath, and by virtue of *The Canada Evidence Act*.

DECLARED at	t	
in the Province	e of Alberta	
this	day of	 ,
A.D. 20	-	

A COMMISSIONER FOR OATHS IN AND FOR THE PROVINCE OF ALBERTA Signature of Declarant

(this page is optional, please see explanation above)

STATUTORY DECLARATION

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CANADA
PROVINCE OF ALBERTA
TO WIT

IN THE MATTER OF RPCA - CHILD INCLUSIVE SPECIALTY TRAINING CONTENT AND REQUIREMENTS

I, ______ of _____, Alberta, DO

SOLEMNLY DECLARE THAT:

- I have reviewed the Education and Experience requirements for being a Child Consultant through the Alberta Family Mediation Society ("AFMS").
- 2) I have reviewed the current minimum required content policy of AFMS for 40 hours of Basic Mediation Training and I have taken one or more courses that have provided me with coverage of all the topics listed in the current minimum required content policy of AFMS for Basic Mediation Training.
- I have taken the required Specialized Child Consultant Training with Assessment courses for Child Consultant status as outlined in the Child Consultant designation/Child Inclusive Specializations requirements.
- I agree to provide the board of directors of AFMS with documentation verifying the courses I have taken and their content upon request.
- I agree to subscribe to the Members' Code of Professional Conduct approved by the Alberta Family Mediation Society.

AND I MAKE THIS SOLEMN DECLARATION conscientiously believing the same to be true, and knowing it is of the same force and effect as if made under oath, and by virtue of *The Canada Evidence Act*.

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Signature of Declarant

A COMMISSIONER FOR OATHS IN AND FOR THE PROVINCE OF ALBERTA