

APPLICATION FOR MEMBERSHIP

Please note, admissions to the Roster are determined by the Board of Directors.

N	ame:			Ema	ail:
Α	ddress:				
P	hone (B):		Phone (C):		Fax:
1.	l am a:	certified member in good member in good	per in good standing wer is good standing we standing of the Collistanding of the BC (ith Family Med lege of Psycholo College of Socia	iation Canada. ogists of BC. I Workers.
			I standing of the BC A I standing of the Me		
2.	•	rovide a brief descript 2-3 lines):	ion of your professic	nal experience	with families, separation and
3.	_	t must have at least o	_	practice regula	rly dealing with issues of
		ration, divorce, paren			,
	☐ I whic thera		working with divorc	ing high conflic	a mental health professional, t families, and experience in child ldren;
	sepa		ting, and the resolut	ion of family jus	regularly dealing with issues of stice conflicts and which includes
	ORI	have the demonstrate	ed equivalency to the	e foregoing and	provide proof as attached;
		e: For non-lawyers or lawyers a commitment to the area.	without family law experien	ce, you must demon	strate knowledge of family justice processes
		e: For non-health professional pplicable and recent child deve	· ·	chout child practice ex	xperience, you must demonstrate knowledge

4. **Parent Coordinator training:** Please complete the chart that follows. Attach extra pages if necessary.

Subject areas	Hours required	Courses	Trainer(s)	Hours	Date taken
(A) Basic training:	At least 40*				
The PC role and responsibilities, child development & developmental needs , child interviewing skills; including high conflict family dynamics Basic conflict resolution and mediation training: Will also include communication skills,	12 hrs of which must be basic PC Training 7 hrs should be child interviewing 7hrs should be dealing with high conflict persons At least 80*				
ethics, role playing; including intercultural training					
Total hours: A					
(B) Additional training: Arbitration and Determination writing training	At least: Lawyers: 40* Mental Health: 21				
Family Dynamics of separation and divorce; Including high conflict family dynamics Family and child law:	At least 21* Mental Health PC exempt At least 21 Family Lawyer PC exempt				
Family Violence: identifying, assessing, and managing family violence & power dynamics; effects of abuse	At least 14*				
Civil Procedure	At least 14 Family Lawyer PC exempt				
Total hours: B					

^{*}The Family Law Act Regulations: required PC training

5.	I have knov	vledge in the following areas:	
	ра	renting skills,	
	ра	rent and child bonding and attachment theory,	
	en en	npirical research on children's developmental needs and age re	elated experiences,
	fai	mily systems dynamics,	
	etl	nno-cultural family dynamics,	
	ris	k evaluation: family violence and harm to self and others,	
	☐ ald	cohol/substance abuse issues.	
6.	disciplined	rrently the subject of a disciplinary citation or action, been four by a professional association or regulatory body, are under pra d an occupational or professional license, or have any restriction	actice supervision, ever
	_	(if yes, please provide details and include date, name of profes	ssional body, type of
7.	List any eth	ical difficulties or criminal convictions relevant to your practice	2.
8.	☐ My two	o referees are listed below and have each completed a PC Rosto	er Reference Form:.
	Name	e:	Phone:
	Name	9:	Phone:
	knowledge	e referee must be from your regulatory organization and the ot of your skills and abilities. References must be current. Reference forwarded directly by the referees to the BC Parenting Coor	nce letters are confidential
9.	I maintain t	the following professional liability insurance:	
	cov	erage of a minimum of \$2,000,000 aggregate and I have provide erage is insured through the Law Society of BC. ent coordinator insurance and I have provided proof that is attempt to the coordinator insurance and I have provided proof that is attempt.	
10.	I attach	my Curriculum Vitae outlining my education and professional nts.	qualifications and

	I am a member of the Law Society of BC and am accredited as a Parenting Coordinator. I attach a copy of my LSBC Certificate of Accreditation <u>and</u> list of courses submitted to LSBC to obtain my PC Accreditation.
	I have paid the application fee of \$150 by way of e-transfer to bcparentingcoordinators@gmail.com , or I have sent a cheque payable to the "BC Parenting Coordinators Roster Society" as a non-refundable application fee.
	I agree to provide a cheque payable to the "BC Parenting Coordinators Roster Society" or an etransfer to bcparentingcoordinators@gmail.com in the amount of \$250.00 for annual membership, once my application has been accepted.
	I hereby give my consent for the Society's Registration Committee to enquire into any representations made on this application for the purpose of clarifying whether I have met the requirements for admission to the BC Parenting Coordinator Roster.
	By submitting this application, I agree that representative(s) for the society may contact other professionals in my region with respect to my application to become a parenting coordinator.
DEC	LARATION:
l,	hereby swear or affirm that:
(a) (b)	the information in this application form and its attachments is true and correct; if admitted to the Roster, I agree:
(D)	(i) to practice according to the policies, procedures, and standards of the Society as set out in the Society's Guidelines for Parenting Coordination, as amended from time to time, and
(6)	out in the Society's Guidelines for Parenting Coordination, as amended from time to time, and (ii) to immediately disclose to the Society any limitations or restrictions imposed upon my professional practice; and
(13)	out in the Society's Guidelines for Parenting Coordination, as amended from time to time, and (ii) to immediately disclose to the Society any limitations or restrictions imposed upon my
Sw	out in the Society's Guidelines for Parenting Coordination, as amended from time to time, and (ii) to immediately disclose to the Society any limitations or restrictions imposed upon my professional practice; and (iii) to maintain a level of continued professional development as determined by the Society, from time to time. Forn Before Me at the Province of British Columbia

Please note that being on the BC Parenting Coordinators Roster does not guarantee work.

Please indicate how many additional pages are attached?

Please submit completed applications electronically to: pcapplications3@gmail.com

Payments made by cheque can be mailed to:
BC Parenting Coordinators Roster Society
c/o Fiona Beveridge Family Law
#300 – 1275 West 6th Avenue
Vancouver, BC V6H 1A6
Telephone: 604-684-5859