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| 200-414 NPO | SAAM FORM 14  ACCREDITATION APPLICATION as SUPERVISOR |

**Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Membership Number** (SAAM-0000)**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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| **ID Number:** |  |  |  |  |  |  |  |  |  |  |  |  |  |

**Checklist of documents required for Supervisor Accreditation Application:**

**See Section I. page 26 in the NABFAM Standards for more information**

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| 1. | Proof of registration with a Member Organization; which should be no less than   * *2019: 3 years* * *2020: 4 years* * *2021: 5 years* |  |
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| 2. | Proof of accreditation as a mediator; which should be no less than   * *2019: 3 years* * *2020: 4 years* * *2021: 5 years* |  |
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| 3. | Proof of relevant academic qualifications and professional experience to provide the proposed supervision. (As a general principle, Accredited Supervisors, will be required to be either Mental Health professionals, or legal professionals. |  |
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| 4. | Proof that he/she has the necessary mediation and professional experience to qualify as a Supervisor (attach CV)   * Professional Experience (5 years) * Mediation Experience (5 years) |  |

**Note: Accredited Supervisors will receive CPD points for each supervision performed**

**Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**