|  |  |  |  |
| --- | --- | --- | --- |
| **Name**: | | **Email:** | |
| **Address**: | | | |
| **Phone (B):** | **Phone (C):** | | **Fax:** |
| **Occupation:** | | **Preferred Pronoun:** | |

**Membership**

1.  **I am a member in good standing of the BC Hear the Child Society (BC HTCS); OR**

**I am NOT a member in good standing of the Society [must complete Section 9(b)].**

2. **I am either:**

**a member in good standing of the Law Society of BC; OR**

**a member in good standing of a mental health profession in BC with standards of professional conduct and ethics, and a disciplinary process:**

**College of Psychologists of BC (RPsych)**

**College of Social Workers of BC (RSW)**

**BC Association of Clinical Counsellors (RCC)**

**Another mental health profession association, namely \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ OR**

**a member in good standing of the Family Roster with the Mediate BC Society, or certified mediator with Family Mediation Canada; OR**

**a member of another Profession: [NB. Candidate must attach details that demonstrate equivalency to the professional categories set out above]**.

**Experience**

3. **Candidate must have at least one of the following:**

**I have a minimum of 5 years of family law practice regularly dealing with issues of separation, divorce, parenting, and the resolution of family justice conflicts and 25 or more cases involving disputes about children (litigation, collaborative, lawyer negotiation, mediation, legal guardian);**

OR

**I have a minimum of 5 years of practice as a mental health professional, that includes experience working with divorcing high conflict families, and experience with separating families, child therapy, consultation, and interviewing children;**

OR

**I have a minimum of 5 years of family mediation practice regularly dealing with issues of separation, divorce, parenting and the resolution of family justice conflicts and which includes experience working with high conflict families in separation or divorce;**

OR

**I have the demonstrated equivalency to the foregoing and provide proof as attached.**

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| **Note:** For non-lawyers or lawyers without family law experience, you must unequivocally demonstrate knowledge of family justice processes and a commitment to the area.  **Note:** For non-health professionals or health professionals without child practice experience, you must unequivocally demonstrate knowledge of applicable and recent child development theory. |

**Training**

4. **I have at least 30 hours of training/education on listening to and reporting the voice of the child including:** Please complete the chart that follows. Attach extra pages if necessary.

**NOTE: Candidate must be able to show how selected courses satisfy the requisite training criteria set out above; and may be required to demonstrate experiential or educational equivalency to such criteria, by outlining in detail the candidate’s experience interviewing children.**

**Each course may only be listed once. But you may break one course down into different components and allocate portions of that course to the different subject areas.**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Subject areas** | **Hours required** | **Courses** | **Instructor(s)** | **Hours** | **Date taken** |
| 1. **Basic training:**   **Child development and structured interviews of children, research on children in family justice decision-making, and ethics of interviewing children** | At least 6.5hrs |  |  |  |  |
| **Child interview skills including building rapport, child-friendly interview environments, appropriate language usage and questions, and effectively reporting the voice of the child** | At least 6.5hrs |  |  |  |  |
| **Subtotal: (A) Hours** | At **least** 13hrs |  | Insert Total → |  |  |
| **(B) Additional training:**  **Other relevant education or training on topics such as the rights of children, research on the inclusion and exclusion of children in family justice decision-making, the impacts of family breakdown or transition on children, risks and protective factors for children in family justice processes** | At least 17hrs |  |  |  |  |
| **Family Dynamics of separation and divorce**  **Including high conflict family dynamics** |  |  |  |  |  |
| **Trauma Informed Practice** |  |  |  |  |  |
| **Diversity and inclusion training and cultural competency training** |  |  |  |  |  |
| **Total hours (A) + (B):** | At **least** 30hrs |  | Insert Total → |  |  |

**NOTE:** Eligible courses include but are not limited to the Hear the Child Society Non-Evaluative Child Interview Training (NECIT), and other courses offered by JIBC, CASW, and CTRI that include the following topics:

|  |  |
| --- | --- |
| * Effects of separation and divorce on parents and children. * Communication skill development of children * Family dynamics. * Adult and child dynamics. * Parent and child bonding and attachment theory. * Child development. * Empirical research on developmental needs, children’s ages, gender systems and structural family theory | * Opinions and effects of parenting arrangements. * Ethno‐cultural family dynamics. * Family violence, power, and control issues. * Alcohol and substance abuse issues. * Trauma Informed Practice. * Cultural Competency Training |

**Additional** **Information**

5. **(a) I have completed a Police Record Check as an individual working with children and/or vulnerable adults, within the last three (3) years [See website for exact details]: I thought it was something like a “Police Record Check with the Vulnerable Sector checked”?? and not “and/or”**

**Yes, it was clear; and I enclose a copy for your review**

**Yes, it revealed a charge or conviction of a relevant offence(s) related to children (please provide details)**

**(b) Have you ever been convicted of a criminal offence related to children, regardless of whether a pardon was granted?**

**No**

**Yes (if yes, please provide details)**

**(c) Are you currently the subject of a disciplinary citation or action, been found guilty of**

**misconduct or disciplined by a professional association or regulatory body, are under practice supervision, ever been denied an occupational or professional license, or have any restrictions on the practice of your profession?**

**No**

**Yes (if yes, please provide details)**

**(d)**  **Have you previously made application to the Child Interviewer Roster and been denied?**

**No**

**Yes (if yes, please provide details)**

6. **Restrictions on my professional practice are:**

**None**

**As follows:**

|  |
| --- |
| **NOTE:** A positive response does not necessarily make the applicant ineligible for admission to the Roster. The BC HTCS reserves the right to assess, on an individual basis, the possible impact of the applicant’s past conduct on Roster eligibility. |

7. **I maintain the following professional liability insurance:**

**coverage of a minimum of $2,000,000 aggregate; OR**

**coverage insured through the Law Society of BC**

**References**

8. My two referees are listed below and have each completed a BC HTCS Roster Reference Form:

|  |  |
| --- | --- |
| **Name**: | **Phone:** |
| **Name**: | **Phone:** |

|  |
| --- |
| **NOTE:** ***At least one must be from a member of the applicant’s profession who is familiar with the applicant’s work; and one must attest to the applicant’s ability to build rapport with children. References must be current (within the last 5 years).*** |

**Fees Enclosed**

9(a) **I have sent in my non-refundable application fee in the amount of $125.00.**

9(b) **I am not a member in good standing & have sent in my membership dues in the amount of**

**$50.00.**

**Note: Payment may be sent by e-transfer to** [**hearthechildsociety@gmail.com**](mailto:hearthechildsociety@gmail.com) **or by cheque made payable to the “BC Hear the Child Society”.**

**Consent**

10.  **I hereby give my consent for the Roster Committee of the Hear the Child 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 HTCS Child Interviewer Roster.**

**DECLARATION:**

|  |  |  |
| --- | --- | --- |
| **I,** |  | **hereby swear or affirm that:** |

**(a) the information in this application form and its attachments is true and correct;**

**(b) if admitted to the Roster, I agree:**

**(i) to practice according to the policies, procedures, and standards of the Society, as amended from time to time, including following the Practice Guidelines,**

**(ii) to immediately disclose to the Society any limitations or restrictions imposed upon my professional practice,**

**(iii) to maintain a level of continued professional development as determined by the Society, from time to time, and**

**(iv) to renew my Police Record Check with Vulnerable Sector Check every three years or at such greater intervals as determined by the Board of Directors of the Hear the Child Society.**

|  |  |
| --- | --- |
| **Sworn Before Me at**  **in the Province of British Columbia**  **on       , 20**  **A Commissioner for taking**  **Affidavits in British Columbia/or/A Notary Public in and for the Province of British Columbia** | **Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |

**Please note that being on the BC Hear the Child Society’s Child Interviewer Roster does not guarantee work.**

[     ] **Please indicate total number of additional pages attached.**

**Please submit your completed application, Police Record Check with Vulnerable Sector Check and letters of reference electronically to:**

[memberships@hearthechild.ca](mailto:memberships@hearthechild.ca)

**Please submit application fee (and membership fee, if applicable) by e-transfer to** [**hearthechildsociety@gmail.com**](mailto:hearthechildsociety@gmail.com) **OR if paying by cheque to:**

**BC Hear the Child Society**

**c/o Unit 11 – 620 Judah Street**

**Victoria, BC V8Z 2K2**