



The Hong Kong Catholic Marriage Advisory Council

Family Mediation Live Supervision Scheme

1. Trainee mediators who apply for live supervision should satisfy the requirements set out by HKIAC (For details, please refer to “HKIAC” Requirements to be an “Accredited Family Mediator” at www.hkiac.org.)
2. The agency charges a standard rate for mediation supervision service: HK\$800 per hour.
(A special rate for Social Worker (ASWO) at HK\$600 per hour).
3. Applicants are required to complete the “*Family Mediation Live Supervision Application Form*” attached and send to :
Mrs. Catherine Tang, Supervisor,
The Hong Kong Catholic Marriage Advisory Council
Marriage Mediation Counselling Service
Units 101-105, M2 Level, Tsui Cheung House,
Tsui Ping (North) Estate, Kwun Tong, Kowloon

Tel.: 27827560 Fax: 23853858
E-mail address: mmcs@cmac.org.hk
4. Upon receiving of the application, the Mediation Service Supervisor of HKCMAC will assign an accredited supervisor (accredited by HKIAC) for the eligible applicants. Special request by the applicant would also be considered, for example, the seniority of the supervisor etc.
5. Applicant will be replied by phone and e-mail of the result of the application.
6. Final payment is due upon the termination of case, including drop-out cases and unsuccessful cases. The supervisor will complete the ‘Family Mediation Live Supervision Hour Record Sheet’ for endorsement by the supervisee.
7. All payment should be made by cheque and payable to “The Hong Kong Catholic Marriage Advisory Council”.
8. Supervisors will provide the evaluation report for the trainee upon the completion of the case.
9. The agency provides only Cantonese speaking case for the practice.

Enquiries: Mrs. Catherine Tang Chow Siu Ling, Supervisor,
The Hong Kong Catholic Marriage Advisory Council
Marriage Mediation Counselling Service
Tel.: 27827560 Fax : 23853858



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Family Mediation Live Supervision Application Form

(A) Name : (In English) _____ (In Chinese) _____ Sex : _____

Work Address : _____

Correspondent Address : _____

Phone Number : (Mobile) _____ (Office) _____

E-mail address : _____ Fax : _____

Organization / Firm : _____

Profession : _____ Job Title : _____

(B) Qualifications

(1) Academic : _____

(2) Family Mediation Course (Basic and Advanced)

Attended 60 hours : Yes no (if no, _____ hours)

Date : _____ Instructor's Name : _____

Organization : _____

(C) Relevant Experiences

(1) Work Experiences :

Organization	Position	From	To	Remarks

(2) Other Disputes Resolution Experiences : _____

(D) Language Capacity

Spoken : _____ Written : _____

(E) Preference for Supervisor

No

Yes _____ (Name of Supervisor)

Signed : _____

Date : _____