



# NABFAM

## TRAINER ACCREDITATION APPLICATION

1. Name

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2. Contact details:

Cell: \_\_\_\_\_

Email: \_\_\_\_\_

3. NABFAM accredited through:

FAMAC

Family Life

KAFAM

SAAM

Social Justice

4. First year of accreditation: \_\_\_\_\_

5. Academic Qualifications

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6. Relevant experience and teaching and professional experience to qualify as a trainer

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7. I have attached proof that I have:

- 5 years professional experience in relevant field
- Teaching experience (3 training sessions/other relevant experience)
- Mediation experience ( 5 years and 12 mediations)

I acknowledge in signing this form that NABFAM retains the right to attend and assess any training provided by an applicant trainer/accredited trainer, and on the basis of that assessment, review his/her accreditation as a trainer.

8. Documents attached:

- Proof as per 7. above
- Copy of current accreditation certificate from NABFAM member organisation
- Proof of payment for application to NABFAM member organisation

Signed at \_\_\_\_\_ this \_\_\_\_ day of \_\_\_\_\_

\_\_\_\_\_

Signature