

# Application for Accreditation as a Family Dispute Resolution Practitioner

**For assistance with completing this application form, please refer to:**

- The Fact Sheet on Accreditation as a Family Dispute Resolution Practitioner (available from: [www.ag.gov.au/fdrproviders](http://www.ag.gov.au/fdrproviders)), and
- The list of authorised witnesses for Commonwealth Statutory Declarations (available on the last page of this application form).

**For details about how your information will be collected, used and stored, please refer to:**

- The Attorney-General's Department's policy on privacy (available at: [www.ag.gov.au/Pages/Privacystatement.aspx](http://www.ag.gov.au/Pages/Privacystatement.aspx)).

**Please send your completed application by mail to:**

Practitioner Accreditation Unit  
Family Law Branch  
Attorney-General's Department  
3-5 National Circuit  
BARTON ACT 2600

**Or by email to:** [fdrregistration@ag.gov.au](mailto:fdrregistration@ag.gov.au) (post the original Statutory Declaration to the address above)

**Before lodging your application, please include the following:**

- Working with Children Check(s) if applicable to your intended FDR service
- A current National Police Check (not older than 4 months)
- Appropriate Qualifications and Competencies
- Suitable Complaints Mechanism(s) (ie: membership or employment evidence)
- Professional Indemnity Insurance cover to provide FDR services (unless applying for Conditional accreditation)
- Statutory Declaration
  - Witnessed by someone eligible as listed on the second page of the Statutory Declaration
  - Please ensure your witness includes their qualification to witness a Statutory Declaration per the list of eligible witnesses (for example: 'Legal practitioner' not 'Bachelor of Laws')
  - Please send the original document to the address above
- Please ensure you sign and date Section H of the application form
- If your documents are in different names, please provide official evidence of the name change

Applications will be processed in order of receipt. Incomplete applications will be placed on hold until all evidence to support the application is provided.

Please allow 28 days for responses to correspondence.

## Section A - Name and Personal Contact Details

1. Title: Dr <input type="checkbox"/> Prof <input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss <input type="checkbox"/> Other:						
2. First name(s):						
3. Middle name(s):						
4. Family name:						
5. Postal address:						
			Post code:			
6. Phone number(s):	Landline number:					
	Mobile number:					
7. Email address(es):	Home email:					
	Work email:					
8. Date of Birth:	Day		Month		Year	
9. Gender:	Male <input type="checkbox"/>		Female <input type="checkbox"/>		Other <input type="checkbox"/>	

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## Section B - Child-related Employment

FDR practitioners may choose to provide child-inclusive services to assist with resolving disputes. This type of service may require the practitioner to obtain a working with children's check, depending on the requirements in the relevant States or Territories. Please check your requirements in the State/Territory you intend to provide services.

10. Are you prohibited under the law of a State or Territory from being employed in child-related employment or working with children?
- Yes (You are not eligible for accreditation as an FDR practitioner)
- No
11. Have you complied with the requirements of the applicable law in the State(s) and/or Territory(s) in which you will provide FDR services, in relation to employment of persons in child-related employment or working with children?
- Yes and **attached** is evidence of a working with children check for each of the States and/or Territories I will be providing FDR services where considered to be child-related employment.
- Or**
- Yes, however I do not require a working with children check due to the type of FDR services being offered as it does not meet any relevant State or Territory's definition of child-related employment.
- No - **State why not in a separate document.**

If typing text directly into this form, please limit text to size of box provided

## Section C - Criminal Convictions

12. Have you been convicted of an offence involving violence to a person?

- Yes (You are not eligible for accreditation as an FDR practitioner)  
 No

13. Have you been convicted of a sex related offence, including rape, sexual assault, indecent assault, unlawful sexual acts with or upon minors, child pornography, procuring or trafficking of a child for indecent purposes or being knowingly concerned with the prostitution of a child?

- Yes (You are not eligible for accreditation as an FDR practitioner)  
 No

**Attach evidence of a National Police Check** (not older than four months from the date you submit your application)

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## Section D – Registration Status

14. Have you previously applied to be an FDR practitioner?      Yes     No

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## Section E – Qualifications and Competencies

15. Please indicate how you meet the Accreditation Standards in regard to Qualifications and Competencies and **attach the evidence**:

- Full Graduate Diploma of Family Dispute Resolution or the equivalent qualification from a certified higher education provider\*

**Or**

- A higher education award (for example, law, psychology, social work, conflict management, mediation, dispute resolution or in a field or discipline relevant to the provision of FDR)

**and**

evidence of having been assessed as competent by a Registered Training Organisation against each of the six compulsory units of competency of the Graduate Diploma of Family Dispute Resolution, or completed the equivalent units certified by a higher education provider\*

**Or**

- Current accreditation under the National Mediator Accreditation System

**and**

having been assessed as competent by a Registered Training Organisation against each of the six compulsory units of competency of the Graduate Diploma of Family Dispute Resolution, or completed the equivalent units certified by a higher education provider\*

**Or**

- Inclusion on the FDR Register on 30 June 2009

**and**

having been assessed as competent prior to 1 July 2011 by a Registered Training Organisation against the three specified units of competency of the (then Vocational) Graduate Diploma of Family Dispute Resolution, or completed the equivalent units certified by a higher education provider\*

\*The list of certified higher education providers is available at [www.ag.gov.au/fdrproviders](http://www.ag.gov.au/fdrproviders)

## Section F – Complaints Mechanism

FDR practitioners are obligated to provide information about their complaints mechanism to their clients prior to an FDR session.

Practitioners should establish an internal complaints handling process for their clients to raise concerns about the FDR service they provide, as well as have an independent third party that can handle complaints about FDR services.

The FDR Register must hold information about each ‘outlet’ practitioners provide services through. Practitioners may have multiple ‘outlets’ on their records. For example, if providing private FDR services, a practitioner’s records must reflect the body that deals with any complaints about that FDR service. Practitioner’s records must also reflect any employment arrangement they have with an organisation funded to provide FDR services.

16. Indicate which complaints mechanism(s) you will be using for your FDR service:

- As an employee or panel member of an organisation funded by the Government to provide FDR services.

Indicate below, the name of the organisation you are employed by or are a panel member of:

**Please attach evidence** of your employment or inclusion on a panel to provide FDR services, or arrange confirmation from your manager to be sent by email to: [fdrregistration@ag.gov.au](mailto:fdrregistration@ag.gov.au)

**AND/OR**

- Through membership of a professional association able to consider complaints about an FDR service you provide.

Indicate below, the name of the professional association you are a member of:

**Please attach evidence** of your membership of a suitable professional association

**AND/OR**

- Through a statutory body established by the Australian or a State or Territory Government that provides FDR services.

Indicate below, the name of the body you are a member of:

**Please attach evidence** of your employment or arrange confirmation from your manager to be sent to [fdrregistration@ag.gov.au](mailto:fdrregistration@ag.gov.au)

## Section G - Professional Indemnity Insurance

Being covered by Professional Indemnity Insurance to provide FDR services is a condition imposed on all FDR practitioners. Insurance cover can be provided through employment or established through a policy arranged through an insurance provider.

If an applicant is not covered by an insurance policy at the time of accreditation and they meet the Accreditation Standards in all other ways, the applicant may be eligible for conditional accreditation.

17. Indicate the type of insurance you have for your FDR service:

- As an employee or panel member of an organisation funded by the Government to provide FDR. **Please attach evidence** of your employment or arrange confirmation from your manager to be sent by email to: [fdrregistration@ag.gov.au](mailto:fdrregistration@ag.gov.au)

**AND/OR**

- Through a policy of Professional Indemnity Insurance established through membership with an insurance provider. **Please attach evidence** of your certificate of currency

**AND/OR**

- Through a statutory body established by the Australian or a State or Territory Government. **Please attach evidence** of your employment or arrange confirmation from your manager to be sent to [fdrregistration@ag.gov.au](mailto:fdrregistration@ag.gov.au)

**OR**

- I do not yet have Professional Indemnity Insurance and wish apply for Conditional Accreditation.

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## Section H – Signature

Signature

Date


If you require assistance with your application or clarification regarding the evidence needed to meet the Accreditation Standards to be an FDR practitioner, you can contact the Practitioner Accreditation Unit:

By phone: 1800 025 255

By email: [fdrregistration@ag.gov.au](mailto:fdrregistration@ag.gov.au)

Any future changes to your details should be made by contacting the Practitioner Accreditation Unit.

## Public Availability (Optional)

Accredited FDR practitioners may wish to make information about their services available to members of the public through the public FDR Register at: [www.fdr.ag.gov.au](http://www.fdr.ag.gov.au)

Details about practitioners who provide services on behalf of a Government-funded organisation will not be publicly available for that service.

Do you agree to the items identified in this section with the symbol ‘’ being made publicly available?

- Yes (please complete all questions in this section of the form)  
 No (do not complete the rest of this section – go to the Statutory Declaration)

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## Complaints mechanism and Professional Indemnity Insurance details

Provide the name of the professional association that will consider complaints about FDR services you provide.

**Attach evidence** of your current membership of this professional association.

Provide the name of the insurance provider you have arranged for your FDR services.

**Attach evidence** of your insurance cover, for example a Certificate of Currency.

## Outlet contact details

1. Business/practice name: (this will appear as: ‘Practitioner’s name - Business name’):

Practitioners may opt to arrange suitable venues to meet client’s needs in various locations and therefore may not have a ‘physical’ address, or may not wish to make their physical address known until a client is engaged. In these circumstances ‘rooms to be arranged’ is recommended.

2. Physical address:

<input type="text"/>		
<input type="text"/>	Postcode:	<input type="text"/>

3. Business contacts (provide as applicable)

Landline:	<input type="text"/>
Mobile:	<input type="text"/>
Toll free number:	<input type="text"/>
Email:	<input type="text"/>
Web address:	<input type="text"/>

**Type of FDR service**  (details of any non-FDR services will not appear publicly)

**For Questions 4, 5 & 6, multiple boxes may be selected**

4. Which of the client groups listed below do you intend to provide FDR services to?

Families and Children

Extended Families

Adult family members

Other, please specify:

5. In which of the following areas do you provide services?

Indigenous service

Property

Family separation

Legally assisted negotiations

Parenting arrangements

Culturally specific services, please specify:

Child support disputes

Cases involving high conflict

Other, please specify:

6. How are you able to deliver your services to clients?

Face to Face

Online/Video conferencing

Telephone

Shuttle mediation

Other, please specify:

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**Outlet access details** 

7. Opening hours (please indicate which days you are available to offer FDR services and your hours of operation and/or indicate you are available by appointment on a particular day)

	Open time	Close time	By appointment
Monday	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>
Tuesday	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>
Wednesday	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>
Thursday	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>
Friday	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>
Saturday	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>
Sunday	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>

If typing text directly into this form, please limit text to size of box provided

8. Service coverage (you can specify up to 30 locations you would reasonably expect your clients to travel from, or you would travel to, to provide your FDR service):


Please note: priority in the search result is given to specifically listed locations/towns over more broadly specified States or Territories. For example, 'NSW' will appear lower in the search results to 'Sydney'.

9. Is there wheelchair access at this outlet?

Yes

No

13. Is there a bus stop within walking distance?

Yes

No

10. Is childcare available at this outlet?

Yes

No

14. Is there a taxi rank within walking distance?

Yes

No

11. Could an interpreter be made available?

Yes

No

15. Is this outlet accessible by train?

Yes

No

12. Is there parking available at this outlet?

Yes

No

16. Is this outlet accessible by tram?

Yes

No

17. How are services charged at this outlet? (Select one only)

Free

Charged

Free and Charged

If there is a cost associated with the service, please provide details. Include as much information as practicable (eg. there may be a sliding cost scale depending on ability to pay).

18. Cost information:




Commonwealth of Australia  
STATUTORY DECLARATION  
*Statutory Declarations Act 1959*

1 *Insert the name, address and occupation of person making the declaration*

I,<sup>1</sup>

make the following declaration under the *Statutory Declarations Act 1959*:

2 *Set out matter declared to in numbered paragraphs*

2

- (1) I have completed the attached document *Application for accreditation as a Family Dispute Resolution Practitioner* and to the best of my knowledge the information included in the application form is true and complete.
- (2) Where I have provided copies of evidence or documentation in support of my application, those documents are true copies of the originals.
- (3) I have the appropriate personal qualities to perform the functions and duties of a Family Dispute Resolution Practitioner.
- (4) I am of good character and I have not engaged in conduct that is likely to bring family dispute resolution into disrepute. (Examples include, having an appropriate standing in the community, being of good fame and character, being regarded as honest and fair, and not engaging in conduct that would negatively impact on the public reputation of Family Dispute Resolution Practitioners.)

I understand that a person who intentionally makes a false statement in a statutory declaration is guilty of an offence under section 11 of the *Statutory Declarations Act 1959*, and I believe that the statements in this declaration are true in every particular.

3 *Signature of person making the declaration*

3

4 *[Optional: email address and/or telephone number of person making the declaration]*

4

5 *Place*

Declared at <sup>5</sup>

on <sup>6</sup>

of <sup>7</sup>

6 *Day*

7 *Month and year*

Before me,

8 *Signature of person before whom the declaration is made (see over)*

8

9 *Full name, qualification and address of person before whom the declaration is made (in printed letters)*

9

10 *[Optional: email address and/or telephone number of person before whom the declaration is made]*

10

*Note 1* A person who intentionally makes a false statement in a statutory declaration is guilty of an offence, the punishment for which is imprisonment for a term of 4 years — see section 11 of the *Statutory Declarations Act 1959*.

*Note 2* Chapter 2 of the *Criminal Code* applies to all offences against the *Statutory Declarations Act 1959* — see section 5A of the *Statutory Declarations Act 1959*.

**A statutory declaration under the *Statutory Declarations Act 1959* may be made before—**

(1) a person who is currently licensed or registered under a law to practise in one of the following occupations:

Architect	Chiropractor	Dentist
Financial adviser	Financial Planner	Legal practitioner
Medical practitioner	Midwife	Migration agent registered under Division 3 of Part 3 of the <i>Migration Act 1958</i>
Nurse	Occupational therapist	Optometrist
Patent attorney	Pharmacist	Physiotherapist
Psychologist	Trade marks attorney	Veterinary surgeon

(2) a person who is enrolled on the roll of the Supreme Court of a State or Territory, or the High Court of Australia, as a legal practitioner (however described); or

(3) a person who is in the following list:

Accountant who is:

- a) a fellow of the National Tax Accountants' Association; or
- b) a member of any of the following:
  - i. Chartered Accountants Australia and New Zealand;
  - ii. the Association of Taxation and Management Accountants;
  - iii. CPA Australia;
  - iv. the Institute of Public Accountants

Agent of the Australian Postal Corporation who is in charge of an office supplying postal services to the public

APS employee engaged on an ongoing basis with 5 or more years of continuous service who is not specified in another item in this list

Australian Consular Officer or Australian Diplomatic Officer (within the meaning of the *Consular Fees Act 1955*)

Bailiff

Bank officer with 5 or more continuous years of service

Building society officer with 5 or more years of continuous service

Chief executive officer of a Commonwealth court

Clerk of a court

Commissioner for Affidavits

Commissioner for Declarations

Credit union officer with 5 or more years of continuous service

Employee of a Commonwealth authority engaged on a permanent basis with 5 or more years of continuous service who is not specified in another item in this list

Employee of the Australian Trade and Investment Commission who is:

- (a) in a country or place outside Australia; and
- (b) authorised under paragraph 3 (d) of the *Consular Fees Act 1955*; and
- (c) exercising the employee's function at that place

Employee of the Commonwealth who is:

- (a) at a place outside Australia; and
- (b) authorised under paragraph 3 (c) of the *Consular Fees Act 1955*; and
- (c) exercising the employee's function at that place

Engineer who is:

- a) a member of Engineers Australia, other than at the grade of student; or
- b) a Registered Professional Engineer of Professionals Australia; or
- c) registered as an engineer under a law of the Commonwealth, a State or Territory; or
- d) registered on the National Engineering Register by Engineers Australia

Finance company officer with 5 or more years of continuous service

Holder of a statutory office not specified in another item in this list

Judge

Justice of the Peace

Magistrate

Marriage celebrant registered under Subdivision C of Division 1 of Part IV of the *Marriage Act 1961*

Master of a court

Member of the Australian Defence Force who is:

- a) an officer
- b) a non-commissioned officer within the meaning of the *Defence Force Discipline Act 1982* with 5 or more years of continuous service
- c) a warrant officer within the meaning of that Act

Member of the Australasian Institute of Mining and Metallurgy

Member of the Governance Institute of Australia Ltd

Member of:

- a) the Parliament of the Commonwealth
- b) the Parliament of a State
- c) a Territory legislature
- d) a local government authority

Minister of religion registered under Subdivision A of Division 1 of Part IV of the *Marriage Act 1961*

Notary public, including a notary public (however described) exercising functions at a place outside

- a) the Commonwealth
- b) the external Territories of the Commonwealth

Permanent employee of the Australian Postal Corporation with 5 or more years of continuous service who is employed in an office providing postal services to the public

*More over page...*

Permanent employee of

- a) a State or Territory or a State or Territory authority
- b) a local government authority

with 5 or more years of continuous service, other than such an employee who is specified in another item of this list

Person before whom a statutory declaration may be made under the law of the State or Territory in which the declaration is made

Police officer

Registrar, or Deputy Registrar, of a court

Senior executive employee of a Commonwealth authority

Senior executive employee of a State or Territory

SES employee of the Commonwealth

Sheriff

Sheriff's officer

Teacher employed on a permanent full-time or part-time basis at a school or tertiary education institution