

# Intermediate Certificate Course in Family Therapy (Fall 2024)

## **Course Objectives:**

This course is designed for professionals who are interested in acquiring clinical experience in working with live families. It employs a hands-on approach on how to apply theory to actual practice. On top of didactic lectures and exercises for skill training, participants will be engaged in working with live families, including assessment and treatment. Participants can bring in their own cases or participate in cases at AAFT to gain practical experience.

## **Entry Requirement:**

Applicants should possess some basic skills in family therapy, preferably from participation in our Basic Course.

## **Certificate of Completion:**

Participants with at least 80% attendance will receive a certificate issued by AAFT upon course completion.

#### Course Dates \*:

Didactic class: 14 sessions, beginning October 8, 2024 (Tuesdays | 6:30 pm – 9:30 pm)

Live Case Demonstration: Three live case demonstrations sessions led by Wai-Yung Lee, Ph.D.

(Saturdays | 2:00 pm – 5:00 pm) \*Dates are subject to change.

## **Course Fee:**

Non-Members: \$15,200 (Early-bird: \$14,700) Member: \$14,350 (Early-bird: \$14,100) *Early-bird deadline: September 8, 2024* 

#### Venue:

Asian Academy of Family Therapy, No. 4 Pottinger Street, Central

## **Faculty:**

Mr. Presley KO, Program Director

\*Oct 8, 15, 29; Nov 5, 12, 19, 26; Dec 3, 10, 17, 2024; Jan 7, 14, 21; Feb 4, 2025\*

\*\*Continuing education points will be awarded for members of the HKPS, HKAM, and SWRB\*\*

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Website: www.acafamilytherapy.org

## Application Form Intermediate Certificate Course in Family Therapy (Fall 2024)

Personal Information  Name of Applicant:	(Mr./ Ms./ Mrs./ Dr. / Prof.)	
Work/ Home Address:		
Contact No.:		Fax No.:
Email:		AAFT Membership No. (if any):
Payment		AAT T WEITIBETSTIP NO. (II ally).
Amount:	Bank:	Cheque no.:
Education		
Highest Degree Acquired:		Year Attained:
Institute:		
PROFESSION (PLEASE "✓" AND	DELETE AS APPROPRIATE)	
☐ Doctor-Specializatio	n:	☐ Nurse-Specialization:
☐ Occupational Therap	pist / Speech Therapist	☐ Psychiatrist
☐ Social Worker		☐ Clinical / educational Psychologist
☐ Teacher		☐ Counselor
☐ Research Assistant /	Officer	☐ Student Guidance Officer / Teacher
☐ Student – Area of St	udy:	☐ Others (Please specify:)
Working Experience		
Current Organization:		
Nature of Service:		Position:
Total no. of years of wor	k experience in current field:	
Please indicate the dates of THREE live case demonstration sessions you prefer:		
		☐ 30 Nov 2024 ☐ 14 Dec 2024 ☐ 4 Jan 2025
Have you attended our Basic	c Certificate Course in Fam	nily Therapy before?
☐ Yes ☐ No		
If yes, please provide the year and the season you attended:		
HOW DID YOU LEARN ABOU	IT US?	
☐ Website ☐ Email ☐ Social service agency	☐ Leaflet ☐ Frien ☐ Hospital/ Clinic ☐ C	nds   Schools   Newspaper  Others, please specify:
<ul> <li>Therapy, No. 4 Pottinger Street, Cer</li> <li>We may arrange an interview wh</li> <li>Course fee is non-refundable and</li> <li>No make-up class will be arrange</li> <li>Receipt and course timetable will attendance or above.</li> <li>Personal Data provided in this for only. Under the provisions of the personal data.</li> </ul>	ntral, Hong Kong en necessary. Successful applicants will I non-transferable unless the applicant's d for applicants who are unable to atter I be distributed on the first day of class a	and a "Certificate of Attendance" will be given to participants with 80% lication for registration, academic, administration and statistical purposes licants have rights to request access to, and to request the correction of, their