



All personal information is collected under the authority of the Community Care and Assisted Living Act, Section 8 and Child Care Licensing Regulation, and will be used to determine if you, the applicant, have the education, experience and other qualifications required by the regulations. Personal information will be used and disclosed in accordance with the privacy protection provisions of the Freedom of Information and Protection of Privacy Act. If you have any questions about the collection, use or disclosure of this information, contact the Early Childhood Educator Registry, PO Box 9961, STN PROV GOVT, Victoria BC V8W 9R4, Phone toll free: 1-888-338-6622.

Note: If you currently hold an ECE Registration number and are applying for an Infant and Toddler Educator (ITE) and/or a Special Needs Educator (SNE) you do not need to complete this section.

All applicants who are applying for an Early Childhood Educator Certificate are required to have 500 hours of direct child care work experience directly supervised by a certified Early Childhood Educator, whose Certificate is valid for the entire 500 hours.

I, _____ verify that _____

NAME OF ECE PROVIDING REFERENCE

APPLICANT'S NAME

completed work experience at _____ in the _____

NAME OF FACILITY

AGE GROUP OF PROGRAM

from _____ to _____ for a total of _____ hours.

MM/DD/YY

MM/DD/YY

The above hours must show that they were completed since the start of the applicant's Educational Training. Based on my observations of the applicant, I am personally satisfied that the applicant is competent:

- checkbox In the areas of child development, guidance, health, safety and nutrition;
checkbox To develop and implement an early childhood education curriculum; and
checkbox With respect to the fostering of positive relationships with children under the care of the applicant, the families of children and with coworkers.
checkbox Has the skills, temperament and ability to work as an Early Childhood Educator.

All boxes must be marked to be valid for use as Work Experience Renewal.

Provide Further comment:

Five horizontal lines for providing further comment.

Table with 3 columns: REFERENCE'S NAME, REFERENCE'S SIGNATURE, DATE SIGNED; CERTIFICATE NUMBER, REFERENCE EMAIL ADDRESS, LENGTH OF TIME KNOWING APPLICANT.