

# Early Childhood Educator Certificate Renewal Professional Development

All personal information is collected by the Ministry of Education and Child Care under the authority of the Freedom of Information and Protection of Privacy Act s. 26(a), and will be used to determine if the applicant has the education, experience and other qualifications required by the regulations. If you have any questions about the collection, use or disclosure of this information, contact the Early Childhood Educator (ECE) Registry, PO Box 9961, STN PROV GOVT, Victoria BC V8W 9R4, Phone toll free: 1-888-338-6622, or email at <a href="ECERegistry@gov.bc.ca">ECEREGISTRY@gov.bc.ca</a>.

#### Instructions

- Use this form if you are applying to renew your Early Childhood Educator (ECE) One Year Certificate and your certificate is expired (less than five years). Attach additional pages if required.
- You must have completed at least 40 hours of professional development (within the last five years) relevant to early childhood education.
- You do not need to submit proof of completion documents with your application submission (for example: workshop certificates or transcripts.
- Make sure you retain proof of completion documents as the ECE Registry verifies information submitted and may request additional information.
- Mail this form with your application to the ECE Registry to the contact information on page 3.

**Applicant Information** 

Legal Last Name (as appears on your primary identification)	Legal First Name (as appears on your primary identification)
Current Certification (Registration) Number	Current Certificate Expiry Date (yyyy-mmm-dd)

**Professional Development** 

Name of Course/Workshop	Name of Host Organization	Contact Information for Host Organization (Phone number or email address required)	First and Last Name of Facilitator/ Instructor	Start Date (yyyy-mmm-dd)	End Date (yyyy-mmm-dd)	Number of Hours
Total Hours:						

CF4111 (2022/07/11) Security Classification upon completion: Page 2 of 3

#### **Declaration**

Confirm your understanding by putting a "x" beside each of the 4 statements below:

I understand that the ECE Registry may require additional information (includi connection with this form.	ng supporting documents) in			
I confirm that the information provided in this form is complete and accurate. I understand if inaccurate information is submitted it may result in the denial of certification.				
I understand that information in this form or subsequently provided information may be reviewed, audited, and verified for the purpose of determining or auditing my eligibility for an ECE Certificate in British Columbia.				
I understand that the ECE Registry may take disciplinary action against me, including action to cancel my certification, if I have, by omission or commission, knowingly given false or misleading information in the course of completing this form.				
Applicant's Full Name				
Applicant's Signature	Date Signed (yyyy-mmm-dd)			

### **Submission Information**

Mail Completed Form To: Early Childhood Educator Registry Ministry of Education and Child Care PO Box 9961 Stn Prov Govt Victoria, BC V8W 9R4

## Questions? Contact the ECE Registry at:

Phone: 1-888-338-6622 Email: <u>ECERegistry@gov.bc.ca</u>

Website: www.gov.bc.ca/earlychildhoodeducators

CF4111 (2022/07/11) Security Classification upon completion: Page 3 of 3