



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.

SECTION 1 REQUIRED DOCUMENTATION FROM APPLICANT

Information Required from Applicants who have Completed ECE Education Outside of British Columbia

In order to be certified in British Columbia through the Early Childhood Educator (ECE) Registry, applicants who have completed their academic education outside of British Columbia must submit the following documents for evaluation:

- 1. A Comprehensive Grade Report (Applicants applying with education completed outside of Canada ONLY) Completed by the International Credential Evaluation Service (ICES). Applicants must complete the ICES Application Form and submit fees directly to ICES. Applicants require a Comprehensive Report. OR NOTE: It is your responsibility to ensure the appropriate fee for official transcripts required by ICES are paid to your institution. Original, Official Transcripts (Applicants applying with education completed in Canada, outside of British Columbia) Original official transcripts must be sent by the educational institution directly to the Early Childhood Educator Registry. 2. Practicum Confirmation (CF1366) Completed by the institution you attended and sent directly to the ECE Registry. Applicants with education done within Canada please refer to the ECE Registry website at www.gov.bc.ca/earlychildhoodeducators for further information on having this form completed. 3. Program Confirmation (CF1363) Completed by the institution you attended and sent directly to the ECE Registry. Applicants with education done within Canada please refer to the ECE Registry website at www.gov.bc.ca/earlychildhoodeducators for further information on having this form completed. 4. One of the following Application forms: A 5 Year ECE Certificate Application (CF1360); or A One Year ECE Certificate Application (CF1365); or A ECE Assistant Certificate Application (CF1362) Available on www.gov.bc.ca/earlychildhoodeducators Completed by applicant and sent directly to the ECE Registry with the necessary documentation. 5. 500 Hour Work Experience Reference Letter, or Character Reference For further details regarding this requirement refer to the ECE Registry website at www.gov.bc.ca/earlychildhoodeducators. 6. *Optional Resume Those applicants who have completed their Early Childhood Educator education more than 10 years ago, must submit a comprehensive resume that includes previous work experience, professional development and contact information for previous employers.

SECTION 2 INSTRUCTIONS FOR APPLICANT

Please send this form to your educational institution, with a covering letter which includes the following:

- a) Your current full name, maiden name, and other names used;
b) Your student number;
c) Your date of graduation; and
d) Your current mailing address and telephone number

IMPORTANT

- Education Institutions located outside of Canada must sent original, official transcripts directly to: International Credential Evaluation Service (ICES) 3700 Willingdon Avenue, Burnaby, British Columbia, Canada V5G 3H2
All education institutions located outside of BC must complete this Practicum Confirmation form and send it directly to: Early Childhood Educator Registry PO Box 9961 STN PROV GOVT Victoria, British Columbia, Canada V8W 9R4



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To: Registrar or Director of Education Programs

_____ has applied to the Early Childhood Educator (ECE) Registry. In order for the ECE Registry to determine how his/her education program meets the competency requirements we require the completion of this form. Please be advised that the ECE Registry may contact you to verify content within this document. Your assistance in this matter will greatly assist in the processing of this application. Thank you.

(FULL NAME OF APPLICANT)

SECTION 1 CONFIRMATION OF STUDIES

To be completed by the Registrar or Director of Educational Programs, and returned directly to the ECE Registry by the educational institutions attended.

[] If the applicant has successfully completed the program, complete the following:

This certifies that _____ was admitted to _____ located in _____, _____, _____.

(FULL NAME OF APPLICANT)

(NAME OF SCHOOL)

(CITY)

(PROVINCE/STATE)

(COUNTRY)

The length of the program was _____ months, or _____ years.

He/She successfully completed the _____ program on _____ and was issued a _____

(NAME OF PROGRAM)

(MONTH/YEAR)

(NAME OF CREDENTIAL EG. BACHELOR OF SCIENCE)

OR

[] If the applicant has NOT successfully completed the program, complete the following:

This certifies that _____ has not successfully completed the program, but has completed _____ months, or _____ years of the program.

(FULL NAME OF APPLICANT)

Credit Conversion

One Credit = _____ academic hours of instruction. (number of)

(OFFICE USE ONLY) DATE STAMP

PART 2 – CONFIRMATION OF PRACTICUM

Practice and Performance Criteria

- The early childhood educator analyzed observation and practice experiences through reflection, self-assessment and feedback.
- The early childhood educator observed children in a variety of settings including:
 - A setting with children who require additional support.
 - A setting with children under the age of three.
 - A setting with children three to five years of age.
- The early childhood educator had an opportunity for supervised practice in a variety of settings including:
 - A setting with children who require additional support.
 - A setting with children under the age of three.
 - A setting with children three to five years of age.

Please provide the following details for each practicum the student completed. As each program is unique the total number of practicum may be less than six.

Practicum One

Course Title and Number associated with the following practicum: _____

Duration/Length of Practicum: _____ hours

Location or setting of Field Practicum: _____

Ages of children: _____

Practicum Two

Course Title and Number associated with the following practicum: _____

Duration/Length of Practicum: _____ hours

Location or setting of Field Practicum: _____

Ages of children: _____

Practicum Three

Course Title and Number associated with the following practicum: _____

Duration/Length of Practicum: _____ hours

Location or setting of Field Practicum: _____

Ages of children: _____

Practicum Four

Course Title and Number associated with the following practicum: _____

Duration/Length of Practicum: _____ hours

Location or setting of Field Practicum: _____

Ages of children: _____

Practicum Five

Course Title and Number associated with the following practicum: _____

Duration/Length of Practicum: _____ hours

Location or setting of Field Practicum: _____

Ages of children: _____

Practicum Six

Course Title and Number associated with the following practicum: _____

Duration/Length of Practicum: _____ hours

Location or setting of Field Practicum: _____

Ages of children: _____

SIGNATURE AND STAMP/SEAL OF REGISTRAR OR DIRECTOR OF PROGRAM		DATE SIGNED (MM/DD/YYYY)
NAME OF REGISTRAR OR DIRECTOR OF PROGRAM (Please print full name)	SCHOOL WEBSITE ADDRESS	REFERENCE EMAIL ADDRESS

RETURN COMPLETED CONFIRMATION TO:

Early Childhood Educator Registry
Ministry of Children and Family Development
PO BOX 9961, STN PROV GOVT
Victoria BC V8W 9R4

Telephone: 1-888-338-6622 (toll free) or 250-356-6501 (Greater Victoria)

Email: eceregistry@gov.bc.ca

Web page: www.gov.bc.ca/earlychildhoodeducators