

Please read the guide below for important information about completing the reissue application form, required documentation and submissions.

REISSUE APPLICATION

- The reissue application is for those who hold a Child Care Services Certification and wish to change their level, classification, and/or name change.
- **Complete all sides and all sections** of the reissue application and **attach** all required documentation.
- Do not forget to sign the reissue application.
- Incomplete reissue application package (incomplete, unsigned and/or illegible application and/or illegible documentation) will be returned to you and may delay the effective date of your certification.
- Attach a fee for a nonstandard sized certificate unless you would like a certificate of standard size then no fee is required.

POST-SECONDARY CREDENTIALS

- A photocopy of your post-secondary credentials needs to be attached to the reissue application. If illegible we will be requesting to resubmit them. You may be asked to produce originals or notarized photocopies.
- If your name is different from the name on your transcript or other documentation you will need to submit proof of name change. Provide a photocopy of one of the following legal documents:
 - Marriage Certificate
 - Driver's License
 - Passport
 - Birth Certificate
 - Divorce Decree
 - Legal Name Change Certificate

Visit www.aecenl.ca under Bursaries/Grants for different Bursaries/Grants, their policies and contact information that might benefit.

- Non-Canadian post-secondary credentials documentation:

If the applicant has received education from outside of Canada, the following documentation is required:

 - An official education assessment from a recognized educational assessment service such as World Education Services (WES) www.wes.org/ca/
 - An official document from the post-secondary institution that includes program information, course descriptions, course and practicum hours
 - An official translation if documentation is in a language other than English

SUBMISSION INFORMATION

Applications can be submitted by mail, courier, email, fax or in person. There is no after-hours drop box at our office location.

MAIL:

Association of Early Childhood Educators NL (AECENL)
P.O. Box 8657
St. John's, NL A1B 3T1

DROPOFF & COURIER:

Do not mail items to this address

Association of Early Childhood Educators NL (AECENL)
59 Pippy Place, Suite 2A
St. John's, NL A1B 4N1

FAX: Toll-Free (877) 579-0217

(Only the most current reissue application package is accepted for fax submission.)

E-MAIL the reissue application package to: registrar@aecenl.ca

How to email your reissue application package:

- Only eligible PDF scanned documentation will be accepted. Photos (e.g. .jpg) are not acceptable as they are unable to produce legible copies.
- Only one email with all attachments should be submitted.
- Put your name (first and last) and Reissue Application Form in the subject line of the e-mail before sending.
- Retain a copy of the original e-mail for your record in the event it is requested to be resubmitted again.
- When you receive a returned message from the registrar@aecenl.ca account, this is confirmation that your application has been received by AECENL.
- Only the most current reissue application is accepted for email submission.

CONTACT INFORMATION FOR INQUIRIES:

Registrar of Child Care Services Certification

TELEPHONE: Toll-Free (866) 579-3004

FAX: Toll-Free (877) 579-0217

EMAIL: registrar@aecenl.ca

WEBSITE: www.aecenl.ca

CHILD CARE SERVICES CERTIFICATION REISSUE APPLICATION

This application applies only to those applicants who hold **NL Child Care Services Certification** and are seeking a reissue (change of level and/or classification). **Please read the Reissue Application Guide before completing the application.**

SECTION A CHILD CARE SERVICES CERTIFICATION HELD

Certificate # _____ Valid Until: _____

SECTION B APPLICANT INFORMATION

Name: _____
Legal First Name Legal Middle Name Legal Last Name

Mailing Address: _____
Street or P.O. Box

_____ City/Town Province Country Postal Code

Telephone: _____
Daytime Contact Number Alternative Contact Number Cell Number

Email Address: _____
(Note: Your email address will not be shared with outside agencies without your permission.)

Date of Birth: _____ / _____ / _____
MM DD YYYY

SECTION C CERTIFICATE SIZE

Note: Only **one** certificate will be issued – frame size and frame size laminated fees are to cover additional materials, postage and handling charges. Check the appropriate box below and if applicable enclose a cheque or money order payable to AECENL (if no box is checked, or appropriate payment is included, the file size certificate will be sent).

- 8.5" x 4" (file size)free of charge
 8.5" x 11" (frame size) \$3.00
 8.5" x 11" (frame size – laminated) \$5.00

This Section - Office Use Only

AIT FCR Graduation policy Region: Metro Central East Western Labrador N/A

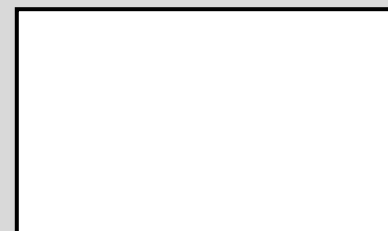
Reissue: Approved Not Approved

Certificate # _____ Level(s): _____ Classification(s): _____

Effective Date: _____ Valid until: _____

Assessment Letter sent: _____ Certificate sent: _____

Notes: _____



SECTION D REASON FOR APPLICATION – (Check all that apply and complete the section(s) indicated) Name change on the original certificate (*complete Section E*) A change of level and/or classification (*complete Section F*)**SECTION E NAME CHANGE ON THE ORIGINAL CERTIFICATES**

I am requesting a reissue of my certification due to changing my name and I am attaching one of the following forms of documentation:

- a photocopy of a marriage certificate
- certificate of divorce
- photocopy of a current legal photo ID
- change of name certificate
- birth certificate
- (ex. driver's license) that bares the new name

My current name on child care services certification: _____

My new legal name: _____

SECTION F CHANGE OF LEVEL AND/OR CLASSIFICATION: (check all that apply)Attach copies of documentation showing completion of post-secondary programs completed since certification was issued. You may be asked for originals or notarized photocopies. **DO NOT** include any program here that was included in your initial application for certification.

- GRADUATED from Degree/Diploma/Certificate Post-Secondary Program(s)**
 Attach photocopies of certificates/diplomas/degrees and official transcripts of coursework that indicate graduation from the program(s).

| NAME OF DEGREE, DIPLOMA, CERTIFICATE HELD | NAME OF POST-SECONDARY INSTITUTION | PROVINCE AND/OR COUNTRY | YEAR COMPLETED |
|---|------------------------------------|-------------------------|----------------|
| | | | |
| | | | |

- Individual post-secondary courses related to Early Childhood Education**
 Attach copies of transcripts. Course descriptions or other related documentation may be required.

| NAME OF POST-SECONDARY INSTITUTION | PROVINCE AND/OR COUNTRY | YEAR COMPLETED |
|------------------------------------|-------------------------|----------------|
| | | |
| | | |

- Completed orientation course or approved equivalent (non-post-secondary)**
 Attach a copy of completion.

SECTION G DECLARATION**NOTE: Applicants must read and sign the following section.**

- I confirm the information contained in this application for certification and any related documents are true and complete to the best of my knowledge.
- I understand that information submitted may be verified with granting organizations and that falsification of information or documentation will result in the cancellation of my certification.
- I understand that the status of my certification may be shared with the Department of Education's Early Learning and Child Development Division in the course of their work.
- If an e-mail address has been supplied with this application general information regarding issues related to certification/bursaries/grants may be sent using this format - my e-mail address will not be shared with other agencies without my prior consent.
- By signing the reissue application form I confirm my understanding and agreement to the terms of Child Care Services Certification.

Signed: _____ Date: _____

SECTION H SUBMISSION INFORMATION**Please refer to the Reissue Application Guide for submission options.**

Before submitting the application package review the application ensuring all sections are completed, true and application signed. Ensure all supporting documentation is attached to the application as well.

CONTACT INFORMATION FOR INQUIRIES: Registrar of Child Care Services Certification

TELEPHONE: Toll-Free (866) 579-3004

EMAIL: registrar@aecenl.caWEBSITE: www.aecenl.ca