



3 Brighton Road  
Charlottetown, PE  
C1A 8T6

**APPLICATION FOR CLASSIFICATION AS A CHILD CARE  
WORKER under the  
CANADIAN FREE TRADE AGREEMENT (CFTA)**

Please print clearly or type. Incomplete applications will be returned.

The CFTA applications should only be completed by individuals with a valid child care worker certificate from a regulatory authority in one of the following provinces/territories: BC, AB, SK, ON, NL, NS, MB and YK

Collection of Personal Information

Your personal information is collected under section 361(1) (b) of *The Freedom of Information and Protection of Privacy Act* and will be used to determine your eligibility to be an Early Childhood Educator / Early Childhood Associate / Early Childhood Intern. For that purpose, it may also be disclosed to regulatory authorities of other Canadian jurisdictions from whom we would obtain verification. If you have any questions about the collection, use or disclosure of your personal information, please contact the Early Learning and Child Care Board, Department of Education and Early Years, 902-368-6513.

<b>Personal Information</b>		
Disclaimer: Please be aware that any changes/additions to your demographic information (names & addresses made on the application will update any and all other files in your name at the Department of Education and Early Years. (qualification, subsidy, licensing, etc.)		
Last name	First name	Middle name
Previous name(s) (include maiden names, previously married or nicknames (if applicable)).		
Last name	First name	Middle name
Last name	First name	Middle name
<b>Mailing Address</b>		
PO/Box # and Group #; building name; civic or municipal address etc.		
City/town/municipality	Province	Postal Code
Phone:	Fax:	Email:
Date of Birth:	YYYY/MM/DD	
<b>REQUIRED DOCUMENTATION</b>		
The following information is required to assess your application. All information provided will be verified with the province/territory with whom the certificate was issued.		
<input type="checkbox"/> <u>Original or official certificate</u> as issued by the regulatory authority in a province/territory of Canada. Please do not send original documents.		
<input type="checkbox"/> <u>Proof of name change</u> if the name on your certificate is different from your current name (example; marriage, divorce or change certificate). Please do not send original documents.		
<b>Authorization Declaration</b>		
I declare that the statements made and the information submitted on and with this application for classification under the Canadian Free Trade Agreement (CFTA) are true.		
I hereby authorize Department of Education and Early Years to verify all documentation provided for the purpose of assessing my applications and to disclose my personal information to the regulatory authorities of other Canadian jurisdictions for the purpose of verifying my eligibility for certification.		
Further, I hereby authorize and consent to the regulatory authority identified as having issued the required documentation, disclosing and releasing to Department of Education and Early Years any and all information required to determine my eligibility for certification and to verify the required documentation.		
I understand that I may withdraw my consent to disclose information in writing at any time before the information is disclosed, but that doing so will affect my eligibility for certification.		
I understand a certificate indicating my level of classification may be cancelled or suspended if I have made false statements or submitted false information.		
X		
Signature		Date