

Saskatchewan Early Childhood Educator Certification Application



Prior to completing this form, please read the *Saskatchewan Early Childhood Educator Certification Guide* which provides important information about eligibility for certification as well as detailed application steps.

Application Type Select the option which applies to you.		
I am applying for the first time for Saskatchewan Early Childhood Educator (ECE) Certification [complete section A, B, D (if applicable), E & G].		
I currently hold a Saskatchewan ECE Certification. I have taken additional credit courses and I am applying to upgrade my certification level [complete section A, B, D (if applicable), E & G].		
I currently hold an Early Childhood Educator Certificate issued by another Canadian province or territory. I am applying to be issued a Saskatchewan ECE Certification at a comparable level [complete section A, B, D (if applicable), F & G].		
I currently hold a Saskatchewan Early Childhood Educator Certification and my name has changed. I am applying to be issued an ECE certificate with my new name (complete section C & G).		
I am applying for a reassessment of my application for Saskatchewan ECE Certification [complete section A, B, D (if applicable) & G].		
A. General Information Select the option which applies to you.		
I am a licensed child care home provider in Saskatchewan.		
I am an employee of a licensed child care centre in Saskatchewan.		
None of the above.		
B. Applicant Information Attach a copy of one piece of identification showing your name, birthdate and signature. Acceptable identification includes a Saskatchewan Non-Driver's Photo ID, a Saskatchewan Driver's Licence, a comparable piece of identification issued by another Canadian province or territory, a Canadian Passport or a Foreign Passport. If the information on your transcripts or course-by-course evaluation (ICAP Report) is different than the name on your identification, attach a copy of a marriage certificate or change of name document that shows your previous name and your current name.		
First Name	Last Name	
Previous Names (if applicable)	Date of Birth (Year/Month/Day)	
Mailing Address	City/Town	
Province/Territory	Country	Postal Code
Email	Phone	
C. Change of Name Complete this section only if you hold a Saskatchewan ECE Certification and would like a certificate issued in your new name. Attach a copy of a marriage certificate or change of name document that shows your previous name and your current name.		

Saskatchewan ECE Certification Level		Date of Birth (Year/Month/Day)	
New First Name (if applicable)		New Last Name	
Previous First Name (if applicable)		Previous Last Name	
Mailing Address		City/Town	
Province/Territory	Country	Postal Code	
Email		Phone	
D. Child Care Centre Information			
Complete this section if you are currently employed in a child care centre in Saskatchewan. Completion of this section releases assessment results to the child care centre for licensing purposes.			
Centre Name		Centre Director	
Street Address		City/Town	
Postal Code		Phone Number	
Email		Early Learning and Child Care Consultant	
E. Post-Secondary Education Information			
Select the option(s) that apply to you.			
<p>My education was completed at a post-secondary institution within Canada or the United States. My transcript(s) will be sent directly by the post-secondary institution(s) to the Ministry of Education - Early Childhood Educator Certification Office. Please list the institution(s) below.</p>			
Name of Institution	Credential Awarded	Date Ordered (Year/Month/Day)	
Name of Institution	Credential Awarded	Date Ordered (Year/Month/Day)	
Name of Institution	Credential Awarded	Date Ordered (Year/Month/Day)	
<p>My education was completed internationally at a post-secondary institution outside of Canada or the United States. World Education Services (WES) will be sending my course-by-course evaluation (ICAP Report) directly to Ministry of Education, Early Childhood Educator Certification Office. Indicate date ordered (year/month/day):</p>			
F. Early Childhood Educator Certification Held in Other Canadian Jurisdictions			
Complete this section if you are a certified as an ECE in another Canadian jurisdiction. Through the provisions of the Canadian Free Trade Agreement (CFTA), if you are an ECE certified by another Canadian province or			

territory, you can apply for recognition of your certificate at a comparable level in Saskatchewan. Attach a copy of your certification issued by the Canadian province or territory to this application form.				
Level of Certification Received		Province or Territory		
G. Applicant Signature				
By signing this application form, I declare that the information including attachments and required documents, are true.				
Signature			Date	
Submit to:				
Saskatchewan Ministry of Education Early Years Attention: ECE Certification Office 2nd Floor, 2220 College Avenue REGINA SK S4P 4V9 Phone: (306) 787-7467 Email: ececertification@gov.sk.ca				
For Office Use Only				
<i>First Time ECE Certification, Upgrade & CFTA Applications</i>				
	Awarded	Declined	Direct	Equivalency
FCCH	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ECE Level I	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ECE Level II	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ECE Level III	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Assessor				
Date Assessed				
<i>Request for Reassessment of ECE Certification</i>				
Date of Original Letter		Request received within 30 days		<input type="checkbox"/> Yes <input type="checkbox"/> No
	Awarded	Declined	Direct	Equivalency
FCCH	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ECE Level I	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ECE Level II	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ECE Level III	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Assessor				
Date Assessed				
<i>Change of Name</i>				
Date of Original Certification				
Certification Under New Name		<input type="checkbox"/> Approved		<input type="checkbox"/> Not Approved
Assessor				
Date Assessed				