

Application for Upgrade

Complete this form if you wish to apply for an upgrade to your level of classification according to qualifications as outlined in Section 37 of the Day Care Regulations. Errors, omissions, or incomplete forms will delay assessment.

1 Give your details

Registration number: _____ Current level of classification: _____

Last name: _____ First name: _____

Middle Initial(s): _____ Former last names if any: _____

Mailing Address: _____ City: _____

Province/Territory: _____ Postal code: _____

Phone numbers: Home _____ Work _____

Email address: _____

Please be advised your email address may be used to contact you regarding your application for classification.

Do you give permission for Classification Services to maintain your email address in a database to send you ongoing communications about the early childhood education sector? YES NO

2 Check the level or approval that you are applying for

Level 1 Level 2 Level 3 School-Age Training Approval

3 Attach supporting documentation

Attach all necessary information:

Copy of orientation completion certificate (if applicable)

Certificate to work in childcare in another Canadian jurisdiction (if applicable)

Or

Official transcripts

They are issued by an approved educational institution and list the courses taken by the student. Official transcripts are in a sealed envelope and show the college seal and/or signature of the registrar. Only Official transcripts are acceptable and must be received by Classification Services prior to any assessment. (No fax or photocopies).

Attached to this application

Will be forwarded directly by educational institution

International credential assessment result – comprehensive course-by-course report (if applicable)

4 Sign the declaration and consent

I declare that the information on this form is true and complete in every respect. I give consent to Classification Services to verify the information contained in this form, for the purpose of classification and school-age training approval.

Signature: _____ Date: _____

5 Send this form to

Classification Services
Early Years Branch
Department of Education & ECD
PO Box 578
Halifax, Nova Scotia
B3J 2S9
Or by email to classification@novascotia.ca

For office use only

Date received (dd/mm/yyyy): _____

Registration number: _____

Date issued (dd/mm/yyyy): _____

Classification level: _____

Upgrade Issued: Yes No

Date Processed (dd/mm/yyyy): _____