

#### **Personal Information:**

Please read through the entire application before you start. Be sure to attach supporting documents such as acceptance into an ECE Program from a recognized post-secondary institution and proof of BC residency.

The ECEBC Education Support Fund is available to domestic residents of British Columbia.

	International Students a	re not eligible to a	apply.
Last Name			
Legal First Name			
Address			
City			
Province			
Postal Code			
Phone Number			
Email			
If you speak an Indigenous Languages you speak fluen	· · _ ·		
C Provincial Health Region:	Interior Fraser Coa	stal Vancouve	er Island Northern
cademic Information: Pleas	e indicate the term for whi	ch you are applyir	ng:
Fall (SeptDec.):  I'm adding courses to my ap  Please indicate full or part-		<b>′</b> Ш	ner (May- Aug.):  ule or course contract)  or less):
Please indicate method of s	tudy: In class/person:	]	
Will you complete your cert	ification this semester? Y	'es No	
evel of Study_			
ost Secondary Institution			Campus
asic Certificate	Post Basic: Infant/	Toddler	Post Basic: Special Needs
riploma: IT and SN	Diploma: Infant/To	oddler	Diploma: Special Needs



#### **Workforce Development Supports:**

Additional supports are available to ECE professionals working in a licensed facility. Subsidies granted in this section will be included in the overall award amount of up to \$5,000. Please see appendix A for additional information. To learn more about what qualifies for the supports please read the Education Support Fund guidelines on our website. Indicate all costs for the duration of your studies.

Name of Child Care Facility:								
Facility Address:								
Facility Phone#:			Facility En	nail:				
I am requesting mileage subsid	ies							
Origin Address		Desti	stination Address			R	ounc	d trip mileage
Anticipated number of trips			otal kilometers (Round trip mileage X Number of trips)				of trips)	
I am requesting subsidies for a								
I am requesting subsidies for e								
I am requesting subsidies to as	sist with tut	oring a	and/or tex	t books	in the amo	unt of \$		
I am requesting Practicum Wathe Applicant Declaration and Cons	sent							
Complete and print out this section practicums.  About the Facility:	i for your en	nploye	er to sign-c	iff if you	are applyi	ng for wag	e suk	osidies due to
		I			05.0			
Number of ECE Certified Employees: Number of non-ECE Certified Employees:					es:			
Will the training result in additional spaces? How many spaces?								
Will the training result in improved	•		ay?		1	<u> </u>	Т	
Will the practicum result in unpaid		sence:		1		f Practicum	า	wks
How many hours a week do you wo	ork?			Hou	rly rate:			

Attach a copy of your most recent paystub to verify your hourly wage.

**Updated January 2020** 



As per the requirements of the Workforce Development Bursary application I,						
certify that my employee,			Is required to	o take a general leave of		
absence to complete ECE practicums. The leave of ab			l be:			
Paid	Unpaid	Partially paid	p to \$			
And for a period of weeks						
We are seeking support to subsidize an amount of \$						

#### **Required Documentation:**

#### **Class Schedule:**

ECEBC requires a copy of your class schedule (your name should be clearly shown) detailing the class name and dates to determine the number of eligible classes on which to base payment. A letter of acceptance or transcripts detailing completed courses will not provide the class information required to determine the value of the bursary for the upcoming semester.

#### **Proof of Residency:**

The bursary program is available to domestic residents of BC, therefore ECEBC requires proof of the applicant's residency in BC. Below is a list of accepted proof:

**BC** Drivers Licence

**BC Services Card** 

BC Hydro Bill (in your name and address)

Any BC Government issued letter in your name and address

Copy of a voided Cheque or Direct Deposit Form to ensure accuracy of banking details

#### **Payment:**

ECEBC reserves the right to audit applications and adjust awarded amounts to ensure applicants receive what is fair and due to them under the terms of this policy.

For examples and more information please review the ECEBC Education Support Fund (Bursary) Policy/Guidelines available on our website.



### **Applicant Declaration and Consent**

I authorize the Early Childhood Educators of BC (ECEBC) to release my application to the Selection Committee. The Selection Committee may be comprised of ECEBC staff, early childhood educator professionals, instructors and ECEBC board members.

I understand that all information provided to ECEBC on this application and accompanying documentation will be used solely for the purposes of determining my eligibility under the ECE Bursary Program, to facilitate payments and to generate a T4A for tax purposes.

I further understand that providing false or incorrect documentation in support of my application may result in my application being declined.

I have read and fully understand the ECEBC Education Support Fund (Bursary) Policy/Guidelines and fully agree to abide by the terms and conditions of the policy.

To facilitate electronic transfer of bursary funds to your bank account ECEBC requires the following information.

Legal First Name:							
Middle Name:							
Last Name:							
SIN #:							
Bank Name:							
Bank Address:							
Institution #		Transit #	Account #				
Poate: Applicant's Signature: Your T4A will be emailed to you unless you indicate here that you want it sent by Canada Post: Are you a member of ECEBC? Yes No Membership details can be found at www.ecebc.ca  I would like information about ECEBC's programs and services, please indicate here							
Have you filled in all areas of the application form? Have you remembered to include your class schedule? Have you remembered to include your proof of residency  You are ready to submit your application to:  bursary@ecebc.ca							



#### **Appendix A- Workforce Development Supports**

The Workforce Development Bursary Fund also provides funding for childcare professionals to remove additional barriers that make continuing with ECE education challenging.

Subsidies granted in this section will be included in the overall award amount of up to \$5,000.

Consideration will be given to costs such as, but not limited to:

- Tutoring
- Transportation

Evening/ weekend childcare

Accommodation

Students living in rural and remote areas, who would not have reasonable access to ECE training or practicum fulfilment may apply for funds to help offset the additional costs of travel and out of town accommodation.

Includes transit passes for travel outside of your home community. For more information on BC's transit systems, zones and fares check the TransLink website for Metro Vancouver for areas outside of the zone

You may also request mileage subsidies for travel between communities. ECEBC aligns with the 2018 Canadian Revenue Agency (CRA) Automobile allowance rates of \$0.55 per kilometer for travel from your residence to post-secondary institution or practicum.

#### **Accommodation**

Students who need to travel to another community for training or to complete a practicum may face a hardship in balancing the cost of commuting and accommodation with the goal of completing studies. Additional consideration will be given to students who require temporary accommodations to complete their studies.

#### Childcare

The Workforce Development Supports for childcare are for costs outside of the student's regular childcare requirements. The intent is to help cover childcare costs associated with attending evening classes and/or weekend program classes.