

DEPARTMENT OF EDUCATION AND EARLY YEARS

EARLY LEARNING AND CHILD CARE

FAMILY HOME CENTRE

LICENCE APPLICATION FORM

Collection of Personal Information

The information collected on this form will be used for licensing under the Early Learning and Child Care Act and Regulations. The information is collected under the authority of the Early Learning and Child Care Board and managed in accordance with the Freedom of Information and Protection of Privacy Act. If you have any question about the collection, use or disclosure of your personal information, please contact the Early Learning and Child Care Board, Department of Education, Early Learning and Early Years, 902-368-6513.

General Instructions:

- Please PRINT all information clearly.
- Complete all sections of the Application Form.
- In addition to the Application Form, a Comprehensive Service Plan must be submitted to the Early Learning and Child Care Board.
- Applicants and Associated Persons must submit a copy of a Criminal Background Check and Vulnerable Sector Search dated not earlier than six months prior to the date of the application.
- Incomplete or illegible applications will not be processed.

Section 1 – Applicant Information

Name of Applicant or Contact Person if Applicant is a Corporation:

Telephone Number (include area code):

Email Address:

Section 2 – Centre Information	
Name of Centre:	
Civic Address of Centre:	
Mailing Address if Different from Above:	
Telephone Number(s):	Email Address(es):

Section 3 – Centre Governance (indicate only one):	
<input type="checkbox"/> Private Owner	Name: _____ Address: _____ Registered with Corporate /Business Names Registry (Yes/No): _____
<input type="checkbox"/> Partnership (list all partners)	Organization Name: _____ Name: _____ Address: _____ Name: _____ Address: _____ Name: _____ Address: _____ Legal Status: _____
<input type="checkbox"/> Corporation Officer (1) Officer (2)	Organization Name: _____ Name: _____ Address: _____ Name: _____ Address: _____ Legal Status: _____

Section 4 – Program Information

Sessions (check most appropriate):

- Full Day
- ½ Day (Morning Only)
- ½ Day (Afternoon Only)
- Before or After School
- Before or After School/School Closures

Hours of Operation: _____

Days of Operation (specify): _____

Months of Operation (specify): _____

Enrollment: Total Number of Children Centre Operator Will Allow Per Session: _____

Will The Centre Register Children (check all that apply):

- Birth – 22 Months
- 22 Months – 3 Years
- 3 Years – School Age
- School Age

Section 5 – Application Fee

The application fee for a licence to operate a Family Home Centre is \$75.

The required fee may be paid by cheque or money order made payable to the *Minister of Finance*.

The required fee is due with the completed application.

Section 6 – Declaration and Consent to Share Information

I declare that all information given on this application is true, correct and complete to the best of my knowledge and I hereby authorize the Resource to the Early Learning and Child Care Board to verify the above information.

Date:

Signature:

Is your application complete? Check all that apply.

Note: Only completed applications are reviewed by the Resource to the Early Learning and Child Care Board. Incomplete or illegible applications will not be processed.

- Comprehensive Service Plan is attached.
- A letter from the Municipality stating the property is correctly zoned for a centre is attached.
- Written verification of required liability insurance is attached.
- Approved declaration for registration of a business name is attached.
- A copy of my results from a Criminal Background Check and Vulnerable Sector Search dated not earlier than six months prior to the date of application is attached.
- If applicable, A copy of the results from a Criminal Background Check and Vulnerable Sector Search dated not earlier than six months prior to the date of application for any individuals associated with the centre is attached.
- Required documentation for a corporation, partnership, or sole proprietorship is attached.
- Application fee is paid.
- This application form is signed and dated.

Send completed application to:

Early Learning and Child Care Board
Department of Education and Early Years
P.O. Box 2000, 3 Brighton Road
Charlottetown, PE
C1A 7N8

For Office Use Only	
Application Received: <input type="checkbox"/> Mail <input type="checkbox"/> Fax <input type="checkbox"/> In Person <input type="checkbox"/> Email Date:	Attached Documents:
<input type="checkbox"/> Application Fee	Staff Signature:
Licence Application Report Prepared: Date: Staff Signature:	
Written Notice of Early Learning and Child Care Board Decision to Applicant: Staff Signature: Date:	