

Medical Form

Early Childhood Education Certificate

Office of the Registrar

Complete this form and submit it to the Office of the Registrar by either email or fax.

604.854.4501
Toll Free: 1.888.823.8734
Fax: 604.853.0138
Email: admissions@ufv.ca

Student's Name	
UFV Student ID:	Date:

Health Care Provider

Your patient, _____, is training for employment in the field of licensed child care. Section 19(1)(e) of the Community Care and Assisted Living Act, CHILD CARE LICENSING REGULATION, requires that prior to such employment, an individual must provide the following:

"a statement signed by a medical practitioner indicating that the person is physically and psychologically capable of working with children and carrying out assigned duties in a community care facility."

Requirements

The "British Columbia Child Care Sector Competencies" & "Canadian Child Care Federation Occupational Standards For Child Care Practitioner" requires individuals in licensed child care to be the following:

- Physically capable of moving quickly:
 - around toys, activity centres, and playing children in order to assist children at risk
 - across a variety of terrains: i.e. pea gravel, wood chips
- Physically capable of getting down to a child's level quickly
- Physically capable of communicating information clearly and sensitively to families
- Capable of hearing and seeing children and psychologically capable of anticipating their needs and responding quickly and effectively

Based upon the information available to me, _____ (name of patient), appears to be mentally and physically fit to work with children in a child care facility.

Printed name of physician: _____

Signature of physician: _____

Date: _____

MEDICAL OFFICE STAMP