

## Ministry of Health

## Department of Health DAY CARE CENTRE PERSONNEL APPLICATION FORM V.4 (2024)

## SECTION A: DOCUMENTATION REQUIREMENTS

- Only photos of documents that are clear and of the complete document will be accepted.
- Degree's supported by Transcripts are required for **PROOF** of Early Childhood Education
- New Personnel to the Field (no CCRP qualification letter)
  - <u>Change of Information Form</u> and <u>Application Form</u> must be submitted immediately (within 24 hours) and <u>Child to Staff Ratio Form</u> must be submitted to the CCRP within the <u>First Two Weeks</u> of employment.
- Personnel known to CCRP (has CCRP qualification letter)
  - Change of Information Form must be submitted immediately (within 24 hours)
  - <u>Application Form</u> and <u>Child to Staff Ratio Form</u> must be submitted to the CCRP within the **First Two Weeks** of employment.
- All personnel documents must be maintained on staff files at the Day Care Centre and updated according to timelines provided below.

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All Day Care Centre	<ol> <li>Change of Information Form **</li> </ol>		
Personnel – must have	2. Child to Staff Ratio Form		
the following on file as	<ol><li>Application Form - Signed by the Personnel (** New to CCRP)</li></ol>		
well as the information	4. Valid Photo ID (** New to CCRP)		
for the position	5. Two Reference Questionnaires		
identified below.	6. Up to date Resume		
	7. Criminal Background Check – Bermuda Police Service or Magistrate		
Required for persons	Court (Issued within the last 2 years) **		
older than 18-years-old.	8. Medical Certificate for Child Care Providers (Completed by your doctor		
	and issued in the last 5 years)**		
** Required before the	9. Department of Child and Family Services Background Check (Issued in		
worker can begin at the	last 2 years)**		
Centre	10. SCARS Certificate (Issued in the last <b>3</b> years)**		
	11. CPR/First Aid (Issued in the last 2 years)		
	For at least one worker in the centre.		
	1. Associates Degree in Early Childhood Education or equivalent, AND		
	proof of 3-years of experience in a daycare setting, or		
	2. A degree other than an Associate Degree that included 4 courses in		
Person in Charge	Early Childhood Education, AND proof of 3-years of experience		
	working in a day care setting, experience or		
	3. Bachelor's Degree in Early Childhood Education or equivalent AND		
	Proof of 1 years post qualification experience.		

Deputy Person in Charge	<ol> <li>A minimum of the Bermuda College Certificate for Child Care         Assistants, or equivalent <u>AND</u> 3 years post-qualification experience; or</li> <li>An associate degree in Early Childhood Education or equivalent <u>AND</u> 1         year post-qualification experience.</li> </ol>	
Staff	Bermuda College Certificate for Child Care Assistants or equivalent	
Assistant	<ol> <li>Must be older than 16 and supervised by a qualified staff</li> <li>Documents for all Day Care Centre Personnel</li> </ol>	
-	DAY CARE CENTRE STUDENT/VOLUNTEER APPLICATION FORM (2024) Documents for all Day Care Centre Personnel	
Summer Students/ Volunteer (under 18 years old) (Must be in High School)	<ol> <li>Application Form (Signed by the Personnel)</li> <li>Copy of Valid Photo ID</li> <li>Two Reference Questionnaires (Template in this application)</li> <li>Current Resume (Must be up to date)</li> </ol>	
Substitute	Same documents and qualifications are required as the person/position they are substituting.	
New to CCRP	No vetting documents on file. Without resume and transcripts showing evidence of the required education, individuals will be qualified as an assistant.	

Section B: Applicant Information			
Name of Applicant:			D.O.B (d/m/yr):
Day Care Centre:			
Position Seeking:	☐ Person in Charge	☐ Deputy ☐ Staff	
	☐ Assistant	☐ Substitute	
Home Address:			
Parish:		Postal Code:	
Telephone:		Cell Phone:	
Email:			

Citizenship (Required)	uired)  Bermudian  Non-Bermudian spouse of a Bermudian  Permanent Resident Certificate (PRC) holder  Non-Bermudian – Work permit number				
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Section C: Education – (tr	ranscripts fo	or degrees	to support the role so	ught, must b	e attached)
School Attended		Degree/Certificate Attained			Year Completed
Section D: Employment I	nformation				
Current Position:					
Business Name:					
Start Date (d/m/yr):			End Date (d/m/yr):		
Previous Position:					
Business Name:					
Start Date (d/m/yr):			End Date (d/m/yr):		
Previous Position:			1		
Business Name:					
Start Date (d/m/yr):			End Date (d/m/yr):		

Section E: Screening Questions - Circle Yes or No for all questions. If you answer yes to any of the				
following questions provide an explanation below.				
1. Have you been charged with, convicted of, or pled guilty or no	Yes	No		
contest to a crime in Bermuda or any other country?				
Explanation:				
		T		
2. Have you had any disciplinary or probationary action taken	Yes	No		
against you by any licensing authority in Bermuda or another				
country? This includes probation, suspension, revocation or denial				
of a license.				
Explanation:				
3. Have you had any form of investigation or disciplinary action by	Yes	No		
any health or social services related agency in Bermuda or				
another country?				
Explanation:				
4. Do you have a mental or physical condition and/or drug or alcohol	Yes	No		
use which could interfere with your current ability to be a day				
care provider?				
Explanation:				

Section F: Declaration Statement – (check each box after read	ding and sign below)		
(	,		
□ I agree the information in this application and the information in any required or following documentation is true and accurate to the best of my knowledge. I understand that false statements may result in the removal from the Day Care Centre.			
☐ I understand my application to be a staff member at a day care centre, if approved, may be suspended or revoked at any time there is significant concern, evidence, or allegation regarding fraudulent activities, abuse or neglect.			
☐ I agree to notify the Child Care Regulation Programme of any changes to the information provided in this registration form.			
☐ I agree for Child Care Regulation Programme and/or MOH to contact relevant persons (including but not limited to regulatory and government entities) to verify the information provided in this application.			
☐ I agree that I will adhere to the Children Act 1998, Day Care Centre Regulations 1999, and Child Care Standards 2018.			
I,, have knowledge of my responsibility to report known or suspected child abuse in compliance with Part III of the Children Act 1998.			
I certify to the best of my knowledge that the information contained in this application is true and factual.			
Printed Name of Applicant			
Signature of Applicant Date	te		
INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED			
Completed applications are emailed to <a href="mailed-childcare@gov.bm">child Care Regulation Programme</a> ,  Department of Health, Ground floor 25 Church St. Hamilton, HM12			

**PATI disclaimer:** This correspondence and any response thereof is subject to public disclosure under the Public Access to Information Act 2010. Most exempt records may be disclosed if it is in the public interest (s.21). Personal information, such as names and personal details of service users, patients, complaints, children and vulnerable adults, is exempt from disclosure (s.23). Information of people receiving discretionary benefit such as a licence is not personal information and can be disclosed (s.24 (1)). Commercial information and information received in confidence may be disclosed if it is in the public interest (s.25&s. 26).