

PERSONAL DECLARATION OF HEALTH

Student Applicant's Name: _____

To the Student Applicant:

Early Childhood Educators must be able to meet the physical and mental demands of the field. They also spend much of their day standing, bending, crouching, sitting on the floor and occasionally lifting children that can weigh as much as 25 kg.

In accordance with [BC Child Care Licensing Regulation](#), Section 19 (1), all Early Childhood Educator's will be required to provide evidence to their employer or licensing officer that they have complied with the Province's immunization and tuberculosis control programs to be employed in a licensed child care centre.

I am to the best of my knowledge:

- ☐ In good general health;
- ☐ In compliance with regional immunization and tuberculosis programs;
- ☐ Free of communicable diseases;
- ☐ Free of any back problems that may interfere with lifting; and
- ☐ Able to work with children at a job in a public child care setting.

These factors may affect your ability to successfully complete the practicum portion of the program and possibly your ability to work in some regions or sectors as an Early Childhood Educator. You should carefully consider your personal goals and local regional requirements before beginning the program.

Student Applicant's Signature: _____

*This is a **PERSONAL** Declaration of Health and should only be signed by the Pacific Rim Early Childhood Institute APPLICANT. This form **should not** be completed or signed by a Physician or other Health Care Professional.*