INDIGENOUS CERTIFICATION BOARD OF CANADA



RECERTIFICATION APPLICATION

Certification renewal required every 2 years

Applicant's Full N	lame							
Current Position								
Home Address								
Home Phone			Cell					
Email								
Current Certifica								
Certificate No.	o.			Expiration Date				
 NOTE: This form is for recertification at the same level. If you are applying for higher certification, please use the Application for a Certification Upgrade. If you obtained a certification through a Certification Equivalence, you will need to complete the Recertification Application for Certification via ICBOC's Equivalence Process 								
Current Employe	r							
Business Address	•							
Work phone			W	ork Ema	il			
EDUCATION/TRAINING								

Forms 2 and 3 are attached, please make sure you also complete them. Please provide photocopies of your certificates/transcripts and/or the original of the declarations for each training (workshops, seminars, courses etc..) or education program you have completed during the last two years.

In total, these two forms should document a minimum of 40 hours that:

- Have been completed in the past 24 months since your last certification
- Be specific to alcoholism and drug abuse counseling and/or related subjects
- If you were required to complete some further training to maintain your certification, please ensure you have taken the training or your renewal will not be granted until this is done
- Alternative forms of training are accepted for recertification, please use the attached form if needed It is mandatory that this form be completed by a qualified person.

RECERTIFICATION FEE

PLEASE ENSURE THAT YOU HAVE ENCLOSED the \$200 recertification fee with all your documents. Review of the recertification application will only proceed once all the documents and the fee have been received.

- If your recertification application is late or incomplete 30 days from the date of your certificate expiry, please add a late fee of \$25.00 (total \$225.00).
- If your recertification application has lapsed or is still incomplete 6 months or more from the date of your certificate expiry, please add a file reactivation fee of \$50.00 (total \$250.00)

SENDING YOUR RECERTIFICATION APPLICATION

Please send this application form, proof of training, and recertification fee made to Indigenous Certification Board of Canada to:

Registrar
Indigenous Certification Board of Canada
#207-2735 East Hastings Street
Vancouver, BC
V5K 1Z8

Form to Document Completed Training/Education offered by External Providers

Valid certificates must be submitted for every completed training provided by external training providers. Unless otherwise indicated on the certificates, 6.5 hours are granted for each day of training.

If you have completed a training program or courses from a college or university program, please provide your transcripts. ICBOC might request a description of the courses completed.

A declaration on the employer's letterhead is accepted as proof or training if it includes the date of the training, its title and number of hours as well as the complete and legible contact information of the qualified person who signed the declaration.

If this training was completed in the context of a conference, please provide the title and hours for every session attended Please photocopy this page to list additional training.

Title of training * (as indicated on certificate)	Training Provider (organization, conference, or trainer)	Hours
	TOTA	AL HOURS
Reserved for ICBOC		

Letter of Declaration Verifying an Applicant's Learning/Training

As an indigenous, culture-based certifying body, ICBOC recognizes that, for various reasons, it is sometimes difficult to attend training outside the community. We believe that knowledge and skills can also be acquired through other means.

IMPORTANT: Please read and complete this form carefully.

- **Do not use this form** for any training provided by external trainers/facilitators. If you attended in-house training, provided by external facilitators, please request certificates, and submit them with your application.
 - Do not list learning/training that total more than 26 hours.

Please only use this form to document the hours of **training acquired in the three (3) alternative ways listed below**, ensuring it is completed as required by a person qualified to sign it (employer, Elder, executive director, supervisor, training coordinator, human resources manager, or any other person responsible for staff training and who can be contacted). **A maximum of 26 hours spent in such activities will be accepted**. In the case of your certification renewal, this could represent over half of the 40 hours required:

- 1. Participation in cultural, traditional activities, ceremonies in the context of your healing work with clients.
- 2. Cultural teachings or advice you received from an Elder at your place of employment, during the course of your work schedule.
- **3.** Training you have yourself delivered in-house to your colleagues, your clients or the public. In this case, please also submit both a copy of the training session description, including the title, learning objectives, content description and agenda

Date of this	declaration		Name	of applicant					
Name of the	Name of the employing organization/agency								
Name of the person qualified to sign this declaration									
Job Title of the person signing this declaration									
Telephone			Email						
List of Training provided in-house and attended by this applicant									
Date of train	ning		Title of	the training s	sess	sion		Hours	
Nata If			- 44-44			d = d / = = = = = d = = d = =		:	
Note: If you	i need more s	pace to list the training Please ensure that					ease photocopy ti	nis page.	