

Employer Verification of Clinician Experience

for employers **outside** the Manitoba public school system



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The criteria for recognizing clinician experience is outlined in the [Teaching Certificates and Qualifications Regulation 115/2015](#) of the Education Administration Act (sections 25 to 28). One year of experience is considered to be 180 days.

To be completed by the Clinician:

Legal Name _____
Surname Given Name Middle Name

Current Address _____
P.O Box/Street City/Town

Province/State Country Postal Code

Date of Birth _____ Telephone No. _____ PSP or Cert. No. _____
Day/Month/Year

Email Address _____

To be completed by the Employing Authority: (Part 1)

Name of institution where experience was acquired: _____

Address _____
P.O Box/Street City/Town

Province/State Country Postal Code

Telephone No. _____ Email Address _____

The following questions must be answered:

1. The position required the employee to hold an academic credential to work as a clinician in the jurisdiction. Yes No
2. The clinician was supervised by a recognized regulatory licensing body. (for example College of Physiotherapists of Manitoba) Yes No
3. The employing authority was supported by funding from the local, provincial/state, or national government (public funds). Yes No
4. 50% or more of the clinician's clientele were school age (Ages 5-18). Yes No
5. Brief Job Description:

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To be completed by the Employing Authority: (Part 2)

Clinician Legal Name _____
Surname Given Name Middle Name

How to complete this form:

FULL DAYS:

2. One full day of experience is defined as the number of hours comprising a full time day by the employer. No more than one full day may be recognized.

IF CLINICIAN WORKED LESS THAN FULL TIME :

1. Divide the number of hours worked per day by the number of hours defined by the employer as a full day to calculate the percentage (%) of full time.
2. Multiply the percentage of full time by the number of days worked to calculate the total full days.

EXAMPLES:

1. 100 days at 3 hours per day. Full time is 8 hours per day: 3 hours divided by 8 = 37.5% x 100 days = 37.5 full days
2. 30 days at 1.5 hours per day. Full time is 7.25 hours per day: 1.5 hours divided by 7.25 = 20.7% x 30 days = 6.21 full days
3. 200 days at 9 hours per day: Full time is 7.25 hours per day: 9 hours > 7.25 so = 100% x 200 days = 200 full days

Enter Full Days worked for each individual year of employment:

Enter only one year per line. Photocopy this form if more than one page is required.

MM DD YYYY to MM DD YYYY	Total Full Days: (see above for calculation)	PCU Office Use
For example <u>July 1, 2017</u> to <u>March 15, 2018</u>	55 days	
_____ to _____		
_____ to _____		
_____ to _____		
_____ to _____		
_____ to _____		
_____ to _____		
_____ to _____		

I am an authorized official of the employing authority and certify the above information is accurate and complete:

Legal Name _____
Surname Given Name Middle Name

Position _____ Email Address _____
Please Print

Signature _____ Date _____

The Employing Authority must return **PAGE 1** and **PAGE 2** by mail or fax to:

Professional Certification Unit
PO Box 700, 402 Main Street N.
RUSSELL MB R0J 1W0 Canada

Telephone 1-204-773-2998
In Manitoba 1-800-667-2378
Fax 1-204-773-2411

This personal information is being collected under the authority of Manitoba Regulation 115/2015 made under The Education Administration Act, and will be used for ongoing verification of certification and notification. Personal information is protected under The Freedom of Information and Protection of Privacy Act. If you have any questions about the collection, contact Professional Certification Unit, Box 700, Russell MB R0J 1W0 ph. 1-800-667-2378 or 1-204-773-2998.