

<b>Name of Proposed Adult Learning Centre (Please print):</b>

# **Application for the Registration of a New Adult Learning Centre**

**2008-09**

**Submission deadline: February 29, 2008**

Please note the following requirements:

- Please submit the signed original plus one photocopy of each document.
- A complete list of all necessary documents is contained in *Section 5: Attachments to the Application* of this *Application for the Registration of a New ALC*.
- All documents are to be submitted at the same time and within the prescribed deadline so that the application can be given proper consideration.

ALL also requests that the application documents be fastened by means of a paper clip or an elastic band. Please do not submit them in binders, duo tangs, or presentation folders of any type, as these complicate the handling and storage process.



**PLEASE CHECK EITHER OPTION A OR B FOR EACH OF STATEMENTS 1 AND 2. IF YOU CHECK 2 B, PLEASE CHECK THE APPROPRIATE BOX (I), (II), III), OR (IV).**

**1. This application is for the registration of a new Adult Learning Centre:**

- A.  to be funded wholly or partially through the Adult Learning and Literacy Branch (ALL) of Manitoba Advanced Education and Literacy.

**OR**

- B.  to be funded wholly through sources other than the Adult Learning and Literacy Branch (ALL).

**2. This new Adult Learning Centre:**

- A.  will be operated directly by a recognized educational institution (school division, college, university, private school, or regional vocational school).

**OR**

- B.  will be operated in a partnership between a recognized educational institution and
- (i) a not-for-profit corporation;
  - (ii) a correctional facility;
  - (iii) a First Nation band council; or
  - (iv) a training centre operated by a union, as defined in *The Labour Relations Act*, on a not-for-profit basis.

**PLEASE PRINT CLEARLY. IF YOU NEED MORE SPACE, INCLUDE ADDITIONAL PAGES.**

**SECTION 1: GENERAL INFORMATION ABOUT THE ADULT LEARNING CENTRE (ALC)**

Name of ALC to be registered:

Civic address:

City/Town:

Postal code:

Mailing address (if different than civic address):

City/Town:

Postal code:

Phone:

Fax:

Name of financial contact person :

Address of financial contact (if different from above):

City/Town:

Postal code:

Email of financial contact:

Phone:

Fax:

If the ALC intends to operate at more than one site, give the name (if different) and address (both civic and mailing, if different) of each location. Use a separate page if necessary.

Name:

Address (both civic and mailing, if different):

**SECTION 2: THE EDUCATION DIRECTOR OF THE ADULT LEARNING CENTRE**

Name of Education Director of ALC:

Address (if different than that of the centre):

City/Town:

Postal Code:

Email:

Phone:

Fax:

Credentials of Education Director (degrees, diplomas, certificates, professional designations):

Manitoba Teaching Certificate Number (if applicable):

Describe the experience of the Education Director related to the management of an ALC. Use a separate page if desired.

**SECTION 3: ADULT LEARNING CENTRE  
OPERATED DIRECTLY BY A RECOGNIZED EDUCATIONAL INSTITUTION**

If the ALC will be operated directly by a recognized educational institution (school division, college or university, private school, or a regional vocational school), then complete Sections 3.A and 3.B. Do not complete Section 4.

**Section 3.A: The operator and authorized representative**

The ALC will be operated directly by the recognized educational institution known as:

Authorized representative:	Title:	
Mailing address of authorized representative:	City/Town:	Postal code:
Email of authorized representative:	Phone:	Fax:

**Section 3.B: Declaration and Authorization**

We, the undersigned, declare that we have reviewed the information included in all parts of this application to register this adult learning centre, including:

- Program Plan
- Proposed Budget
- Technology and Equipment Refresh Funding Request, if applicable

We further declare that the information is accurate and complete, and that this application for registration is being made with our full knowledge and consent.

**Authorized Representative of OPERATOR**  
(Operator means a recognized educational institution, not-for-profit corporation, correctional facility, or First Nations Band Council)

*NOTE: The education director is not eligible to sign as the authorized representative of the Operator.*

Name (print): \_\_\_\_\_

Title (print): \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Education Director**

Name (print): \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Other** (optional)

\_\_\_\_\_

Name (print):	_____
Title (print):	_____
Signature:	_____
Date:	_____

### SECTION 4: ADULT LEARNING CENTRE OPERATED IN A PARTNERSHIP

**If the ALC will be operated as a partnership between a recognized educational institution and either a not-for-profit corporation, a First Nation band council, a correctional facility, or a training centre operated by a union ("Partner A"), then complete Sections 4.A and 4.B. Do not complete Section 3.**

#### Section 4.A: The operator and contact information

##### Recognized Educational Institution

Name of recognized educational institution:

Authorized representative of the recognized educational institution (not the education director):

Title:

Mailing address of authorized representative:

City/Town:

Postal Code:

Email address of authorized representative:

Phone:

Fax:

##### Partner A: not-for-profit corporation, correctional facility, First Nation band council or training centre operated by a union

Name of Partner A:

Authorized representative (not the education director) of Partner A:

Title:

Mailing address of authorized representative of Partner A:

City/Town:

Postal Code:

Email address of authorized representative of Partner A:

Phone:

Fax:

If the partnership includes a not-for-profit corporation, indicate the name and number of that corporation. In addition, attach a list of officers of the corporation.

Corporation name:	Corporation number: <input type="checkbox"/> Federal <input type="checkbox"/> Provincial
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**Section 4.B: Declaration and Authorization**

We, the undersigned, declare that we have reviewed the information included in all parts of this application to register this adult learning centre, including:

- Program Plan
- Partnership Agreement
- Proposed Budget
- Technology and Equipment Refresh Funding Request, if applicable

We further declare that the information is accurate and complete, and that this application for registration is being made with our full knowledge and consent.

**Authorized Representative of Recognized Educational Institution**  
*NOTE: The education director is not eligible to sign as the authorized representative of the Recognized Educational Institution.*

Name (print): \_\_\_\_\_

Title (print): \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Authorized Representative of Partner A** (not-for-profit corporation, First Nation Band Council, correctional facility, or training centre operated by a union)  
*NOTE: The education director is not eligible to sign as the authorized representative of Partner A.*

Name (print): \_\_\_\_\_

Title (print): \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Education Director**

Name (print): \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Other** (optional)

Name (print): \_\_\_\_\_

Title (print): \_\_\_\_\_

Signature:	_____
Date:	_____



***In accordance with Sections 20, 21 and 22 of the Adult Learning Centres Act, changes to the above information that occur during the program year must be communicated in writing to the Registrar, Adult Learning and Literacy.***

<b>Section 5: Attachments to the application</b>
<p><b>Please ensure that you have attached these documents to this application <u>in the following order</u>:</b></p> <ul style="list-style-type: none"><li>o Inventory list</li><li>o Partnership Agreement, if applicable</li><li>o Program Plan</li><li>o Proposed Budget</li><li>o Technology and Equipment Refresh Funding Request, if applicable</li><li>o Copy of most recent financial statement, if applicable</li><li>o Documentation confirming funding from sources other than Adult Learning and Literacy, if applicable</li><li>o List of officers of not-for-profit corporations, if applicable</li><li>o Confirmation of liability insurance</li></ul>

SAMPLE ONLY  
contact ALL for current copy

**SAMPLE ONLY**  
contact ALL for current copy





**Partnership Agreement**

**MEMORANDUM OF PARTNERSHIP AGREEMENT**



In accordance with 8(2) of the *Adult Learning Centres Act*, this document establishes a Memorandum of Partnership Agreement

BETWEEN the not-for-profit corporation, correctional facility, First Nation band council, or training centre operated by a union:

\_\_\_\_\_  
*(referred to, for the purposes of this document, as Partner A)*

AND the Recognized Educational Institution:

\_\_\_\_\_  
*(referred to as the Recognized Educational Institution)*

AS THE REGISTERED OPERATOR OF:

\_\_\_\_\_  
*(registered name of the Adult Learning Centre)*

**Terms of Agreement:**

Effective date:

\_\_\_\_\_

Termination date:

\_\_\_\_\_

Conditions of termination, if applicable:

\_\_\_\_\_

Conditions of renewal, if applicable:

\_\_\_\_\_

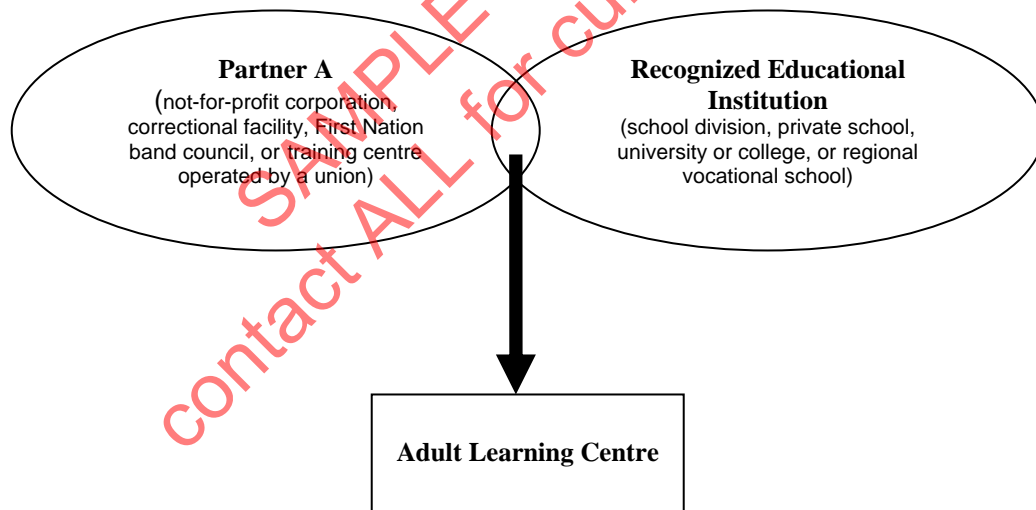
**PREAMBLE:**

*The Adult Learning Centres Act states:*

**“Each entity in a partnership is jointly and severally responsible to operate the registered centre and provide an educational program in accordance with this Act and the regulations, the conditions and requirements of the registrar and the provisions of the partnership agreement.”**

While the partnership agreement indicates which partner is taking lead responsibility for specific areas in the operation of the ALC, the delegation of lead responsibility to one partner in no way lessens the joint oversight responsibility of each collaborating partner.

The governing body of the not-for-profit organization / correctional facility / First Nation Band Council / or training centre operated by a union AND the governing body of the recognized educational institution will have in place appropriate policies and procedures that guide the management of their partnership relationship and that ensure a shared monitoring of the ALC.



CATEGORY	QUESTION	Indicate which partner is taking <b><u>LEAD RESPONSIBILITY</u></b> for the management of the areas listed below.	
Where check marks appear in <u>both</u> columns, a description of how both partners are responsible must be provided in the <i>Comment</i> section.		Partner A	Recognized Educational Institution
Educational Programming and Staffing	<b>1. Who ensures curriculum meets Department standards?</b>		
	<i>Comment:</i>		
	<b>2. Who is the employing authority for the following?</b>		
	a) Education Director		
	b) Teachers		
	c) Instructors, if applicable		
	d) Non-teaching staff		
	<i>Comment:</i>		
	<b>3. Who is responsible for the following regarding the teaching staff?</b>		
	a) Supervising teachers		
	b) Disciplining teachers		
	c) Evaluating teachers		
	<i>Comment:</i>		
	<b>4. Who administers the following?</b>		
	a) Payroll and benefits for teachers		
	b) Payroll and benefits for non-teaching staff		
	<i>Comment:</i>		
	<b>5. Who prepares each of the following documents?</b>		
	a) Professional Development Plans for teachers		
	b) Professional Development Plans for non-teaching staff		
	<i>Comment:</i>		
	<b>6. Who authorizes Professional Development expenses?</b>		

CATEGORY	QUESTION	Indicate which partner is taking <b><u>LEAD RESPONSIBILITY</u></b> for the management of the areas listed below.	
Where check marks appear in <u>both</u> columns, a description of how both partners are responsible must be provided in the <i>Comment</i> section.		Partner A	Recognized Educational Institution
<i>Comment:</i>			
<b>7. Who is involved in the hiring of teachers?</b>			
<i>Comment:</i>			
<b>8. Who ensures teachers are properly certified?</b>			
<i>Comment:</i>			
<b>9. If learners under the age of 18 are enrolled, who ensures each person who works at the centre provides a criminal record check and child abuse registry check?</b>			
<i>Comment:</i>			
<b>10. Who creates and submits reports required by the Professional Certification and Student Records Unit? (monthly staff changes, staff listing, full days taught)</b>			
<b>NOTE: Student Marks are submitted in accordance with the Student Records Unit's [Education, Citizenship and Youth] collection standards. A letter with submission instructions is sent to Directors of Adult Learning Centres and Educational Partners of Adult Learning Centres in advance of the mark submission deadline.</b>			
<i>Comment:</i>			
<b>11. If applicable, who ensures collective agreements are adhered to?</b>			
<i>Comment:</i>			
<b>Operating and Financial Administration</b>	<b>12. Who is responsible for maintaining financial records and books in accordance with the funding agreement?</b>		
	<i>Comment :</i>		
	<b>13. Who has the authority to enter into agreements for borrowing, line of credit, or loans with financial institutions?</b>		
	<i>Comment :</i>		
	<b>14. Who has the authority to enter into lease agreements for premises?</b>		
<i>Comment:</i>			

CATEGORY	QUESTION	Indicate which partner is taking <b><u>LEAD RESPONSIBILITY</u></b> for the management of the areas listed below.	
Where check marks appear in <u>both</u> columns, a description of how both partners are responsible must be provided in the <i>Comment</i> section.		Partner A	Recognized Educational Institution
	<b>15. Who has the authority to enter into lease agreements for equipment, vehicles, etc.?</b> <i>Comment:</i>		
	<b>16. Who ensures the Audited Financial Statements are prepared in accordance with financial reporting standards (GAAP) and Adult Learning and Literacy policy?</b> <i>Comment:</i>		
	<b>17. Who ensures insurance coverage is in place in accordance with the funding agreement for the following?</b> a) Comprehensive general liability insurance of two million dollars (\$2,000,000.00) b) Corresponding insurance to cover property damage and bodily injury <i>Comment:</i>		
	<b>18. Who are the funding cheques payable to?</b> <i>Comment:</i>		
<b>19. Further criteria / conditions of Partnership Agreement. (Please provide details that are unique to your partnership that are not addressed above. Add pages as required.)</b>			
<b>NOTE:</b>  Any administrative fees payable to the Recognized Educational Institution, as described in the approved Revised Budget, are on a cost-recovery basis only			

**Signature Page for Partnership Agreement**

**Name of Partner A:**

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Signed on \_\_\_\_\_, 200\_\_\_\_,

In the presence of:

By the authorized representative for Partner A:

*(NOTE: the education director is not eligible to sign as the authorized representative of Partner A.)*

\_\_\_\_\_  
Witness (Print name)

\_\_\_\_\_  
Name (Print)

\_\_\_\_\_  
Witness (Signature)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title (Print)

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**Name of Recognized Educational Institution:**

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Signed on \_\_\_\_\_, 200\_\_\_\_,

In the presence of:

By the authorized representative for Recognized Educational Institution

*(NOTE: the education director is not eligible to sign as the authorized representative of the Recognized Educational Institution)*

\_\_\_\_\_  
Witness (Print name)

\_\_\_\_\_  
Name (Print)

\_\_\_\_\_  
Witness (Signature)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title (Print)

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