



Notice of Intention to Apply For Validation

PLEASE READ THE ACCOMPANYING EXPLANATORY NOTES BEFORE COMPLETING THIS FORM. MAKE SURE YOU PROVIDE ALL DOCUMENTS REQUIRED AND SIGN THE DECLARATION ON PAGE 3

Office use only – file number

(PLEASE USE BLOCK LETTERS)

PERSONAL DETAILS

Title Dr Mr Mrs Ms Other:

Gender Male Female

Given Names

Family Name

Address

Suburb/City State

Daytime Telephone Postcode

Mobile

Email Address

CLASSIFICATION DETAILS

What is your current classification level?

Classification for which you are seeking validation? Accomplished
Exemplary

When is your Incremental Anniversary Date? ___/___/___ Day Month Year

What date do you intend to apply for validation? ___/___/___ (see explanatory notes) Day Month Year

POST SECONDARY OR HIGHER EDUCATION QUALIFICATIONS

Give details of **ALL** early childhood teacher post-secondary or higher education courses you have completed. If you have more than two (2) qualifications, attach a separate sheet giving the additional details.

Qualification 1

Qualification title

Institution attended

If you have a statement of equivalence* from Early Childhood Australia that applies to your qualification, what is the date of the statement?

___/___/___ Day Month Year

***Please supply a copy of the statement.**

Qualification 2

Qualification title

Institution attended

If you have a statement of equivalence* from Early Childhood Australia that applies to your qualification, what is the date of the statement?

___/___/___ Day Month Year

***Please supply a copy of the statement.**

EMPLOYER DETAILS

If you are employed by more than one employer, complete a copy of the employer details and declaration for each employer.

Employer

Licensed Children's Service Name

Licensed Children's Service Number

Workplace location address

APPLICANT DECLARATION

You must read and sign this declaration

I declare that:

- The Information I have supplied on this form is true and correct for the purposes of the early childhood teacher validation process
- I undertake to inform VETASSESS of any changes to my circumstances in writing (eg contact details) while my application is being considered.
- I have read and understood the information supplied to me in the Explanatory Notes accompanying this application.

Applicant Signature

Date

___/___/___ Day Month Year

EMPLOYER** DECLARATION

You must read and sign this declaration

I declare that the information supplied in this form is true and correct for the purposes of the early childhood teacher validation process and that:

- I have received this **Notice of Intention to Apply for Validation** from(insert name of teacher) who is currently employed at(insert name of service) at(insert current classification)

I confirm that(insert name of teacher)
has met the eligibility requirements* to apply for the validation process to proceed to
.....(insert classification applying for) classification.

I confirm that..... (insert name of teacher)
has provided evidence of the qualification described on page 2.

Employer Name [please print]

**** Employer should consult MECA 2005 clause 12 for detailed information regarding eligibility requirements.**

AUTHORISATION*

Name of Authorised Person

Position of Authorised Person

Signature of Authorised Person

Date / / Day Month Year

*** Note an authorised person of the organisation must sign this form. By signing this certification the signatory warrants that they are duly authorised to sign on behalf of the organisation**

EMPLOYER CONTACT DETAILS FOR CORRESPONDENCE

Name

Address

Telephone

Email

SUBMIT NOTICE OF INTENTION TO APPLY FOR VALIDATION

Please retain a copy of this form for your records and forward the signed original to:

Early Childhood Teacher Validation
VETASSESS
GPO Box 2752
MELBOURNE VIC 3001

Or →

Early Childhood Teacher Validation
VETASSESS
Level 4
478 Albert Street
EAST MELBOURNE VIC 3002



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EXPLANATORY NOTES

Introduction

Under the Early Childhood Teacher Multi-Employer Certified Agreement (MECA) 2005 the classification structure for early childhood teachers comprises three classifications:

- I. Graduate
- II. Accomplished
- III. Exemplary

Once you are at the top of the range of a classification for a minimum of twelve months, and have satisfactorily completed Professional Development and Enhancement Program (PDEP) requirements, you can apply to move to the next classification through early childhood teacher validation. The process involves an independent validation of evidence you provide against a set of professional standards grouped into three domains: professional knowledge, professional practice and professional engagement and commitment.

You can apply for validation online or by completing a print-based application form. For the purpose of the validation process, early childhood teachers are those engaged to deliver a kindergarten or funded early intervention program.

Validators

Validators have an early childhood teaching qualification and a high level of understanding, experience and recognised expertise in early childhood education.

The validation process is monitored to ensure the integrity of the process and validators are required to abide by strict confidentiality guidelines and privacy legislation.

Eligibility for Validation

To be eligible to apply for validation to progress from Graduate to Accomplished you must:

- have a minimum of three years of experience
- have successfully completed three PDEPs at Graduate classification
- satisfy the professional standards of the Accomplished classification
- undertake the roles and responsibilities of an Accomplished teacher

To be eligible to apply for validation to progress from **Accomplished to Exemplary** you must:

- have a minimum of seven years of experience

- have successfully completed three PDEPs at Accomplished classification
- satisfy the professional standards of the Exemplary classification
- undertake the roles and responsibilities of an Exemplary teacher

Notice of Intention to Apply for Validation Form

You should submit this **Notice of Intention to Apply for Validation** form no more than six months prior to eligibility. The form must be completed and signed by you. It must be certified by each of your employers confirming your identity, qualifications and eligibility to apply for validation.

If forged, altered, or falsified documents are submitted to VETASSESS, no assessment will be issued.

If this form is not completed correctly and/or appropriate documentation is not provided, processing of your application may be delayed.

Applying for Validation

Following submission of this **Notice of Intention to Apply for Validation form**, you should prepare your evidence and submit an **Application for Validation** form no less than three months prior to your incremental anniversary date.

The **Application for Validation** form is a separate form and is available from VETASSESS.

Withdrawal of application

You can withdraw this application at any time. If you withdraw your application, you must notify both your employer and VETASSESS.

If you change employers after submitting the **Application for Validation** form you must submit a **Change of Details Notification** form with details of the new employers. The timeline for your validation will not change.

Privacy Statement

Whenever VETASSESS collects, handles, stores, uses or discloses information about you, it aims to comply with the applicable Privacy Principles that apply to protect your personal information. 'Personal information' means information or an opinion (including information in a database) about an individual whose identity is apparent or can reasonably be ascertained.

Any questions?

Contact VETASSESS if you:

- have any questions about the validation
- would like to request access to the personal information that VETASSESS holds about you
- would like to request VETASSESS to update or correct the personal information it holds about you.

Contact VETASSESS

- Visit: www.validation.com.au
- Email: validation@vetassess.com.au
- Telephone: 61 3 9655 4801
- Facsimile: 61 3 9655 4888

Write to:

Early Childhood Teacher Validation
VETASSESS
GPO Box 2752
Melbourne VIC 3001

