







## APPLICATION FOR A CERTIFICATE OF QUALIFICATION / CERTIFICATE OF QUALIFICATION (WITHOUT WRITTEN EXAM) OR PROVINCIAL CQ/DA FOR IP

-  This form should be used if you wish to apply for certification in an occupation designed under the Apprenticeship and Occupational Certification Act. Complete, sign and return to Apprenticeship and Occupational Certification.

You must indicate the number of hours of practical experience you have gained in the occupation on this application. Employer confirmation forms attesting to your experience from your current and past employers must be attached to your application. These forms are available at any of our eight regional offices. These addresses are available from our website at [www.aoc-acp.gnb.ca](http://www.aoc-acp.gnb.ca).

There are different avenues to obtaining certification – check our website under “Designated Occupations”, then click the occupation you are interested in and you will find all the information you need.

### IMPORTANT REMINDERS

-  Type or print clearly
-  Incomplete forms will not be processed
-  Sign and date your form
-  Mail your form to the address provided or deliver it to the Apprenticeship and Occupational Certification office nearest to you.
-  Include a cheque or money order payable to the Minister of Finance.

### INSTRUCTIONS FOR FILLING OUT THE FORM

<b>Client Id No. :</b>	Not required / office use only
<b>Application No. :</b>	Not required / office use only
<b>Occupation name:</b>	Name of occupation in which you are requesting certification
<b>Occ. Code :</b>	Not required / office use only
<b>Region :</b>	Not required / office use only
<b>PERSONAL :</b>	Complete all fields
<b>WORK EXPERIENCE :</b>	Complete all fields except “checked by” and “Time in occupation” which are to be filled out by office
<b>EDUCATION:</b>	Complete all fields
<b>OTHER CERTIFICATES....:</b>	Complete all fields
<b>OTHER INFORMATION:</b>	Complete all fields

**SIGNATURE AND DATE :** Please don't forget to sign and date the consent to disclose information.

**CONSENT TO DISCLOSE INFORMATION:** Sign and date if you authorize our Branch to disclose information respecting your participation in the apprenticeship program and/or occupational certification program for the purposes of providing verification of your apprenticeship registration, and/or your certification, to assist in securing, promoting, and maintaining employment; to determine your eligibility for apprenticeship and

occupational certification programs in other jurisdictions; to assist with inter-provincial labour mobility; and, for program planning and labour market research.

**A FEE OF :**                      **Fees are as follow:**

<b>Certificate of Qualification Challenger Assessment</b>	100.00
<b>Certificate of Qualification Examination</b>	
Examination	250.00
Re-examination	120.00
Practical Examination/Re-examination	350.00
<b>Interprovincial (Red Seal) Standards Examination</b>	200.00
<b>IP Holder from Another Jurisdiction</b>	150.00
<b>Equivalent Standards</b>	150.00
<b>Certificate of Qualification (Without Written Exam)</b>	200.00
<b>Foreign Credential Assessment</b>	100.00

**Signature and Date :**                      Please don't forget to sign and date the application.

**REMARKS:**                                      This section is to be filled by the Regional offices.