

**ACCEPTANCE OF CONDITIONS FOR APPRENTICESHIP CREDITS
WHILE EMPLOYED IN ANOTHER CANADIAN JURISDICTION**

1. Individual must have and maintain permanent residence in Newfoundland and Labrador (NL).
2. Applicant must have completed all entry-level courses in the relevant occupation at a post-secondary educational agency in NL.
3. Applicant will submit:
 - this document with applicable signatures
 - a completed Out-of-Province Application for Apprenticeship if this is the initial registration
 - a completed Letter of Understanding (LOU) with all requested signatures
 - applicable academic transcripts; all apprentices under a LOU agreement must have a minimum of entry-level courses completed in their specified trade
4. All documents are to be forwarded to the Program Development Officer (PDO) at the Industrial Training office nearest the applicant's NL address (see addresses below).
5. The PDO will confirm that the employer has valid status as a supporter of apprenticeship with the Apprenticeship Branch in the jurisdiction of employment.
6. On positive response, the Application will be sent to the Director for signature in order to register the apprentice on the behalf of the Newfoundland and Labrador Provincial Apprenticeship and Certification Board (PACB).
7. The apprentice will be registered, sent a letter of registration and/or copy of LOU, and a Record of Occupational Progress (Logbook).
8. A copy of the LOU will be forwarded to the employer.
9. When the apprentice returns to NL and wishes to update his/her status as per the information recorded in the logbook, an *affidavit which affirms that the reflected time and skill sign off is authentic must be included (*the affidavit is available at the Industrial Training office). This affidavit must be witnessed by a Commissioner for Oaths, Justice of the Peace or Notary Public who is registered in the Province of NL only. **Only the original affidavit is acceptable.** No faxed or photocopies will be accepted. When the PDO is satisfied that all documents meet the requirements, the apprentice will be awarded credit for employment hours.
10. Arrangements for required in-school training will be made **only** after the credit has been entered on the Industrial Training Section apprenticeship database.
11. All apprentices who return to work in their registered occupation in NL **MUST** have a Memorandum of Understanding (MOU) signed and will then follow regular guidelines as stated in the Conditions Governing Apprenticeship Training.

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Avalon	Clareville	Central	Western	Labrador
Department of Advanced Education & Skills Industrial Training Section 1170 Topsail Road P.O. Box 8700 St. John's, NL A1B 4J6 Phone: 709-729-2729 Fax: 709-729-5878 Toll Free: 1-877-771-3737	Department of Advanced Education & Skills Industrial Training Section 45 Tilley's Road Clareville, NL A5A 1Z4 Phone: 709-466-3982 Fax: 709-466-3987 Toll Free: 1-877-771-3737	Department of Advanced Education & Skills Industrial Training Section 42 Hardy Avenue Grand Falls-Windsor, NL A2A 1W9 Phone: 709-292-4215 Fax: 709-292-4502 Toll Free: 1-877-771-3737	Department of Advanced Education & Skills Industrial Training Section Aylward Building 1-3 Union Street P.O. Box 2006 Corner Brook, NL A2H 6J8 Phone: 709-637-2366 Fax: 709-637-2519 Toll Free: 1-877-771-3737	Department of Advanced Education & Skills Industrial Training Section Bursey Building 163 Hamilton River Road P.O. Box 3014, Station B Happy Valley-Goose Bay, NL A0P 1E0 Phone: 709-896-6348 Fax: 709-896-6703 Toll Free: 1-877-771-3737

To the Applicant:
 Please retain page 1 for your records,
 and submit page 2 to the Industrial Training office nearest your NL address.

I, _____, of _____, NL, confirm that I will be
(Apprentice name – please print) *(Town/City)*
 filing personal income tax forms as a resident of NL for this current year and for the duration of this
 agreement. I am also confirming that I have read and agreed to the special conditions as outlined on
 page 1 and if accepted, will abide by the conditions as outlined.

 Applicant's Signature

 Witness (print name)

 Date

 Witness (signature)

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