



## Early Childhood Education and Care Diploma Program – Employer Agreement

Complete each section as appropriate. Please sign the agreement and approval of the conditions stated herein.  
Forward the completed document to [ece-ea-office@nlc.bc.ca](mailto:ece-ea-office@nlc.bc.ca).

Student Last name (Legal):	Student First name (Legal):
NLC student number (1234567):	Email:

Supervisor/Manager Contact Name:	Email:	Daytime phone number:
Child Care/Organization Name:		
Address:		
City:	Province:	Postal code:
This facility is a <input type="checkbox"/> BC Licensed Childcare <input type="checkbox"/> StrongStart or Aboriginal Head Start <input type="checkbox"/> Other: please identify: _____ Program License # _____		
Mentor Educator First Name (as it appears on the BC ECE Registry Certification):	Mentor Educator Last Name (as it appears on the BC ECE Registry Certification):	
Mentor Educator Certification Number:	Expiry (as it appears on the BC ECE Registry Certification):	
<p>The role of the employer in Work Integrated Learning, is to support the student named above by:</p> <ul style="list-style-type: none"> <li>Assigning a mentor educator who will provide the student/employee with direct supervision, meet with them regularly, and offer both formal and informal feedback. The Mentor must be a BC ECE Registry Certified Educator (not under exemption) and agree to commit to overall supervision and mentorship of required hours within a term (i.e. 130 hours each for practicum 1 and 2; 165 hours for practicum 3, 200 hours for practicum 4).</li> <li>Attending an initial meeting with the instructional team (via Microsoft Teams video conferencing).</li> <li>Providing a supportive atmosphere/environment for the student/employee and mentor educator to explore new perspectives and practices.</li> <li>Agreeing to regular communication with the instructor (allows time for employee to complete studies within the workplace).</li> </ul> <p>Note that the employee is not required to remain employed by this employer for the duration of the program. Also note that the same mentor is not required for the full duration of the program.</p>		
I acknowledge that the employees applying to the ECE WIL program will need to be provided with various opportunities to successfully complete their course work and will support them to the best of my ability.		
_____ Employer Signature		_____ Date