

Faculty of Continuing Education & Training

Medical Certificate for Early Childhood Education and Related Programs

The purpose of our Early Childhood Education program is to prepare practitioners to provide a safe environment for infants and young children. Students provide physical care, emotional support, mental stimulation, and encouragement and support for the cognitive skills of the developing child.

The program requires students to participate in a variety of physical activities in classroom and field experiences. This medical certificate is a pre-requisite for admission into the program and required before commencement of field placement.

Surname Given Name Social Insurance Number

Address Postal Code Phone Number

Physician's Name Address

City Province Postal Code Phone Number

I, a legally qualified medical practitioner in the province of Ontario, have medically examined the above mentioned on this _____ day of _____ 20__ and Certify:

a) **FREEDOM FROM COMMUNICABLE DISEASE:**
Tuberculin kin test: Date _____ Results: _____
Or
Chest X-Ray Date: _____ Results: _____
(if tuberculin positive)

Date of most recent booster: _____
(Diphtheria, Tetanus, & Polio) (Due every 10 years)

Rubella Status: MMR - Date of Immunization: _____
Or
Rubella- Date of Immunization: _____
Or
Rubella Titre Results: _____

b) **General Physical Conditions: (Attach additional sheet if space needed).**

c) **Present Health Condition:**

d) **Present Medications:** _____

I have completed examined _____ today, and find this individual to be capable of full participation in the Early Childhood Education program or related program.

Physician's Signature Date