

**APPLICATION FOR RENEWAL OF PRIVATE TRAINING INSTITUTION
REGISTRATION (PTI – 5)**

Pursuant to the *Private Training Institutions Act and Regulations*

Privacy Notice: The information collected on this form is collected under the authority of Section 61(c) of the Access to Information and Protection of Privacy Act, 2015 (ATIPP, 2015) and is used for the purposes of administration of Private Training Institutions as well as for statistical and research purposes. If you have any questions about the collection or use of this information, please contact the Information Management Division of the Department of Education at 709-729-6281.

Instructions to Applicants:

- Print or type all responses.
- A separate application is required for each Private Training Institution campus.
- Use additional sheets of paper if required.
- **Attach a certified cheque or money order to this application, made payable to the Newfoundland Exchequer Account, in the amount required for the fees identified in section 4 of this application.**
- Attach all required forms and supporting documents to the last page of this application.
- Should you have any questions regarding the completion of your application, please contact the Manager of Private Training or the Program Development Specialist assigned to your institution.
- Application forms and supporting documentation, including cheques/fee payment, must be signed and returned, no later than December 31 of the current calendar year, to:

Manager, Private Training Institutions
Division of Literacy and Institutional Services
Department of Education
P. O. Box 8700, St. John's, NL, A1B 4J6
Telephone: (709) 729-3102
Email: PTI@gov.nl.ca

SECTION 1: General Private Training Institution Information

A. Institution/Applicant Information:

Name of Institution: _____

Name of Primary Contact for Institution: _____

Institution Site Address: _____

Web Site Address: _____

Mailing Address: _____

Postal Code Telephone E-mail Fax

B. Signing Authorities/Agents Registration

- Provide the names of individuals responsible for the operational aspects within the Private Training Institution. Where necessary, record additional agents and their responsibility on a separate sheet.

Should there be changes to agents and/or their responsibilities within the registration year, the Department must be notified in writing, with an updated Signing Authorities table submitted which reflects changes in staff responsibilities.

Agents to be Registered for Operational Aspects	
<input type="checkbox"/> Registration Renewal Documentation	<input type="checkbox"/> Student Contracts
<input type="checkbox"/> Bond/Letter of Credit	<input type="checkbox"/> Student Records (Academic)
<input type="checkbox"/> Audited Financial Statement	<input type="checkbox"/> Student Records (Financial)
<input type="checkbox"/> New Program Applications	<input type="checkbox"/> Student Refunds
<input type="checkbox"/> Changes to Existing Registered Programs	<input type="checkbox"/> Student Complaints
<input type="checkbox"/> Instructor Approval Applications	<input type="checkbox"/> Advertising/Marketing/Website
<input type="checkbox"/> Instructor Records	<input type="checkbox"/> Student Handbook/Policies
<input type="checkbox"/> Other (please specify)	

SECTION 4: Registration Renewal Fees

- Identify the registration renewal fees due with your application, along with any other outstanding fees required to be paid for the period January 1 – December 31. Please note that all fees are required to be paid in full before any processing of registration renewal documents can be finalized and your certificate issued.
- Also note that, where an institution offers advanced level training for Apprenticeship programs, **no program registration fee is required to be paid** for Advanced Level apprenticeship programs.

Registration Renewal Fee	Fee Amount	Number (Programs, Instructors, etc.)	Total Fees to be Paid
Campus Registration	\$500 x	1	\$500
Active Programs	\$200 x		
Inactive Programs	\$100 x		
Instructors	\$25 x		
Demonstrators	\$25 x		
REGISTRATION FEES DUE (I)			

Other Required Fee	Fee Amount	Number (New Instructors, etc.)	Total Fees to be Paid
New Instructor Approval Requests	\$100 x		
Substantive Program Change Requests	\$100 x		
Non-Substantive Program Change Requests	\$50 x		
Inspection Fees (New Site; New Facilities, etc.)	\$450 x		
Audited Financial Statement Late Fee	\$100 x		
Registration Renewal Application Late Fee	\$100 x		
OTHER FEES DUE (II)			

TOTAL FEES DUE (I + II)			
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- Attach a certified cheque or money order to this application, made payable to the Newfoundland Exchequer Account, in the amount required above. Please ensure that cheques are mailed to the Division of Literacy and Institutional Services. For ease of processing, one cheque is acceptable for payment of all fees associated with this registration renewal application.**

SECTION 5: Information on Applicant(s)/Agent(s)

Business Information:

Name of Registered Company: _____

- Provide the contact information for each person in the sole proprietorship/partnership/corporation/or franchise, as listed through Service NL’s Registry of Companies.

Name	Address and Contact Telephone Number	Business Relationship
		Partner <input type="checkbox"/> Director <input type="checkbox"/>
		Partner <input type="checkbox"/> Director <input type="checkbox"/>
		Partner <input type="checkbox"/> Director <input type="checkbox"/>
		Partner <input type="checkbox"/> Director <input type="checkbox"/>

SECTION 6: Security Information

- Provide Information related to the Security in place for your institution, including a copy of the continuation certificate, or other written evidence (i.e., email) from your financial institution indicating that the security is current. Where changes are required to the amount of the security, based on 15% of the net tuition revenue reported on the Annual Statistical Report (PTI-6), an amendment by the financial institution will be required.

Security Type		Financial Institution	Current Amount	New Amount (if applicable)	Changes Required (Y/N)
Bond	Letter of Credit				
<input type="checkbox"/>	<input type="checkbox"/>				

SECTION 7: Declaration

The application for Private Training Institution Registration must be signed by the applicant.

I HEREBY CERTIFY THAT ALL INFORMATION CONTAINED IN THIS APPLICATION AND IN ITS ATTACHMENTS IS CORRECT AND THAT I HAVE VERIFIED THE INFORMATION SUBMITTED.

I HEREBY CERTIFY THAT I AM ABLE TO COMPLY WITH THE REQUIREMENTS FOR A PRIVATE TRAINING INSTITUTION AS PRESCRIBED IN THE *PRIVATE TRAINING INSTITUTIONS ACT AND REGULATIONS*.

I UNDERSTAND THAT INFORMATION PROVIDED TO THE DEPARTMENT OF EDUCATION WILL BE TREATED AS CONFIDENTIAL SUBJECT TO THE PROVISIONS OF THE *PRIVACY ACT*.

Name of Applicant: _____

Signature of Applicant: _____

Applicant Title: _____

Date of Application: _____