

## RENEWAL APPLICATION - CERTIFICATE OF QUALIFICATION

### PLEASE PRINT

Trade \_\_\_\_\_

Trade Code \_\_\_\_\_ Registration # \_\_\_\_\_ Application # \_\_\_\_\_

Full Name \_\_\_\_\_  
First Name Middle Name Last Name

Address \_\_\_\_\_

City/Town \_\_\_\_\_ County \_\_\_\_\_ Province \_\_\_\_\_

Postal Code \_\_\_\_\_ Home Phone \_\_\_\_\_ Business Phone \_\_\_\_\_

Social Insurance Number \_\_\_\_\_ Date of Birth \_\_\_\_\_

Certificate of Apprenticeship # \_\_\_\_\_ Date Issued \_\_\_\_\_

Certificate of Qualification # \_\_\_\_\_ Date Issued \_\_\_\_\_

Interprovincial Red Seal # \_\_\_\_\_ Date Issued \_\_\_\_\_

Not Trade Employed (date) \_\_\_\_\_ Retired  Yes (date) \_\_\_\_\_

### RELEASE OF ELECTRONIC PHOTOGRAPH AND SIGNATURE

I hereby authorize the Department of Service Nova Scotia and Municipal Relations to provide my driver's license or identification card photograph and signature electronically to the Labour and Workforce Development, Apprenticeship Training, for use on my identification card.

Client Name \_\_\_\_\_ Client Master Number \_\_\_\_\_  
(please print) (Driver's License)

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Method of Payment:**  Certified/Business Cheque  Money Order  Visa  Master Card  Debit Card  Cash

\_\_\_\_\_  
(credit card account number) (card holder's name) (expiry date) (signature)

- Please enclose your fee payable to the MINISTER OF FINANCE in the amount of **\$65.54** and forward completed application to the address above. **Personal cheques are no longer accepted and will be returned.**
- **Debit** and **Credit** payments are accepted in Halifax, Sydney and Truro Offices.
- **DO NOT MAIL CASH** - cash payment is accepted in the **Halifax** location with exact change only.

**The Department will hold all personal information provided in confidence.**