

# **INDIGENOUS CERTIFICATION BOARD OF CANADA**



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## **ACCREDITATION APPLICATION PACKAGE**

**FOR IN-PERSON EDUCATION OR TRAINING PROGRAMS  
OFFERED BY UNIVERSITY' COLLEGES  
AND OTHER EDUCATIONAL INSTITUTIONS**

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**2023**

## CHECKLIST

Please check boxes to verify you are sending all the documents

<b>GENERAL INFORMATION FORM</b>	
<i>(If you track students after graduation, please provide separate information/statistics)</i>	
<b>STATEMENT OF VALUES FORM</b>	
<b>PLANNING/DEVELOPMENT PROCESS</b>	
- Program Rationale Form	
- Program Consultation Form	
<b>PROGRAM DESCRIPTION</b>	
- Program Description Form – Page 1	
- Program Description Form – Page 2	
- Curriculum Information Form (1 for each Course)	
- Practicum Information Form	
+ Document describing the practicum	
+ Copy of Practicum Report used by the College/Educational Institution	
- Course Syllabus Form (1 for each Course)	
<b>DELIVERY PROCESS</b>	
- Instructors Information Form	
+ CV for each instructor	
+ Short Bio from each Instructor (see Page 12)	
+ 1 letter of personal Reference	
+ 1 letter of endorsement	
- Teaching Methods Tools Form	
- Learning Environment Information Form	
- Special Learning Supports Form	
<b>EVALUATION PROCESS</b>	
- Program Evaluation Form	
<b>COMMENTS FORM</b>	
<b>FEES</b>	
<b>WHERE TO SUBMIT YOUR ACCREDITATION APPLICATION</b>	

GENERAL INFORMATION							
Name of Institution							
Website (URL)							
Main Address							
Name of contact person for this accreditation process							
Professional title							
Telephone				Fax			
Cell				Email			
Number of campuses		<i>If appropriate, SVP provide a separate sheet with campuses list &amp; contact info.</i>					
Number of years of operation							
Number of years serving First Nations Students							
Average number of Aboriginal Students registered per year							
Do you track success rate for Aboriginal Students? <i>(check box)</i>				Yes		No	
TRAINING PROGRAM(S) DETAILS							
Name of program to be accredited							
Name of Faculty or Department							
Is there a website documenting this program? <i>(If yes, please provide the URL)</i>							
Program Type <i>(check box)</i>	Full Time		Continuing Education		Other		
If other, please specify:							
NOTE: If you track the success rate of Aboriginal Students in the program SVP provide this information separately							

## STATEMENT OF VALUES

**NOTE:** In addition to completing this form, please provide, if you have it your own organizational statement of value or code of ethics, and attach it to this form, making sure to indicate the date when this statement/code of ethics was adopted.

**Describe how your own principles and values are compatible with those of ICBOC**

**Additional comments:**

PLANNING/DEVELOPMENT PROCESS				
<b>PROGRAM RATIONALE</b>				
Is this a long standing program	yes	<input type="checkbox"/>	Launch date	<input type="text"/>
A newly launched program	yes	<input type="checkbox"/>	Launch date	<input type="text"/>
An upcoming program	yes	<input type="checkbox"/>	Launch date	<input type="text"/>
<b>Please explain the rationale that guided the planning/development of the program</b>				
Did you conduct a formal needs assessment?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
<b>Percentage of students per identity</b>				
Mainstream Canadians	<input type="text"/>	First Nations	<input type="text"/>	Inuit
				Metis
<b>If others, please specify</b>		<input type="text"/>		
<b>Possible career options for Aboriginal students who successfully complete the program</b>				
<b>Who at the College was involved in the planning/development of this program</b>				



## PROGRAM DESCRIPTION (1)

**Overview of the program** *(Use and attach separate page if you need more space)*

**Goals and objectives of the program** *(Use and attach separate page if you need more space)*

**# of courses in the program**

**Total # of class hours**

**Regular Admission requirements** *(Use and attach separate page if you need more space)*

**Special Admission Requirements** *(Use and attach separate page if you need more space)*

**Are students assessed for prior learning**

**Yes**

**No**

**Please provide details**

## PROGRAM DESCRIPTION (2)

**Other Admission Conditions** *(Use and attach separate page if you need more space)*

**College guiding principles for personal suitability**

**Expected conduct**

### Graduation requirements

<b>GPA Requirement</b>			<b>Credits requirement</b>			
<b>Practicum</b>	<b>Yes</b>		<b>No</b>		<b>Number of practicum hours</b>	

NOTE: Please attach details of the practicum to this program description page

<b>Assignments?</b> <i>(Details SVP)</i>	
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<b>Examinations?</b> <i>(Details SVP)</i>	
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**Conditions attached to the time allocated to complete the program?** *(If yes, describe SVP)*

<b>Graduation with Honours offered?</b>	<b>Yes</b>		<b>No</b>		
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**If other types of graduation are offered please indicate below:**

Transfers	Yes	No
<b>Students can access program through transfer</b>		
<b>Students can transfer to other program within or off college</b>		
<b>Students can transfer into related degree-level programs</b>		
<b>Provincial, National and/or international certification &amp; standards achieved</b>		





## PRACTICUM INFORMATION

Please provide details about the practicum(s) you may offer

Total number of practicum hours included in the program

Where do you generally place your Aboriginal students for their practicum:

What are the learning/practice objectives of the practicum:

How is the student assessed during the practicum:

### NOTE:

1. Please provide the printed material related to the practicum
2. Please provide a copy of a blank practicum report used by the college

## COURSE SYLLABUS

Please feel free to provide a copy of your own syllabus, if you prefer. Just ensure that it includes the information listed below for the courses in the program

**Course name:**

**Course Number:**

**Credit Assignment:**

**Department:**

**Prerequisite:**

**Total Hours:**

**Office Hours:**

**Instructor:**

**Year and Semester:**

**COURSE DESCRIPTION:**

**SCHEDULED CLASS ACTIVITIES:**

- **Learning Experience** *(How it will be accomplished):*

- **Course Schedule and Daily Activity**

Number of days allocated to the course:

Activity to open sessions:

Morning Breaks: (ex: 10:00- 10:15 am)

Lunch: (ex: 12:00 – 1:00 pm)

Afternoon Break: (ex: 3:00 – 3:15 pm)

Activity to close sessions:

**Detailed Description of activities/topics for each day** *(example below)*

<b>Day 1</b>	<b>8:30 – 12:00</b>	<b>Lunch</b>	<b>Afternoon</b>
	Prayer and sharing circle		Introduction to ....
	Protocols & Expectations		Powerpoint presentation
	Overview of course		Group discussion & group report
			Examination of topic elements
			Sharing circle to close session

**STUDENT EVALUATION PROCEDURES:** *(example below)*

Attendance	%
Participation	%
Assignments	%
Presentations	%
Final Exam	%

**Grading procedures in accordance with:**

**LEARNING OUTCOMES:**

Upon successful completion of this course, student will be able to:

**GENERAL LEARNING OBJECTIVES OF THE COURSE:**

**REQUIRED TEXT AND MATERIALS:**

**OTHER RESOURCE MATERIALS AND REFERENCE TEXTS:**

**TRANSFER CREDIT AT OTHER POSTSECONDARY INSTITUTIONS:**

*(either provide information here or direct to source of information)*

**OTHER INFORMATION:** *(ex: Program Approval Information)*

**COURSE DETAILS:** *(ex: Copyright, Website details, Web content management details etc...)*



## DELIVERY PROCESS

### TEACHING METHODS/TOOLS

**Describe the teaching methods/tools that are used to deliver the program, and why they are culturally relevant**

## DELIVERY PROCESS

### LEARNING ENVIRONMENT

Please describe how your institution creates an optimal learning environment (physical, psychological, mental and spiritual) based on a sense of safety and cultural relevance. **If you have additional information you wish to provide separately attach it to this form.**

## DELIVERY PROCESS

### SPECIAL LEARNING SUPPORT

**Do you have any support provision for students who might be emotionally "triggered" during delivery of a course?**

Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	If yes describe below how you do this
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**Are there any circumstances where you do provide sessions in an Aboriginal language?**

Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	If yes describe below
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**How do you assess and monitor the cultural competence of the program instructors?**

## PROGRAM EVALUATION PROCESS

Does your institution regularly evaluate/review this program? Check box if yes

Please provide details on when and how your institution evaluates/review the program? (*methodology: steps, what is evaluated, by whom, tools etc...*)

Are students involved in the evaluation process?

Yes

No

If yes, please describe how:

Describe the student evaluation follow-up process

**NOTE: Please submit the documents you provide students to evaluate the program/course and instructors**



## YOUR COMMENTS AND QUESTIONS

**Do you have any other information or comments you wish to add about your institution, or the program you wish to accredit with ICBOC**

**Do you have any questions or suggestions about this accreditation process?**

## FEES

ICBOC's Accreditation Fees are calculated as follows:

- A \$600.00 **Application Processing/Review Fee**, to be sent with the application documents.
- **An Onsite Assessment Fee** based on the geographical location of the college and the time allocated to perform the on-site assessment (1 day for certificate programs, 2 days for diploma/enhanced diploma, 2.5 days for bachelor programs). \$700 per day plus accommodation and travel.
- **A Program Accreditation Fee**, based on the number of accredited courses in the program (\$150.00 per course)
- **Accreditation Report** report and certificate \$500

The total fees include the Certification of Instructors in the field represented by the program delivered by the institution, valid for 3 years

### Renewal Fees

- ICBOC's accreditation of training programs (and registration of trainers/instructors) is valid for three years.
- The total fee for an education/training program accreditation renewal is \$600.00 every three (3) years, provided the training has not been modified.

## OVERVIEW OF THE ACCREDITATION PROCESS

- Once the Institution has indicated its commitment to accredit a program, and has provided a list of the courses in the program, ICBOC will forward an application package and invoice.
- The institution sends the completed accreditation application, other requested documents and payment of the fees documented in the invoice to ICBOC.
- The **pre-site** review (completed application package and accompanying documents) will begin upon receipt of the fees.
- Once the pre-site review is completed, ICBOC and the person acting as program accreditation liaison for the institution will make arrangements for an **onsite** visit (1 day for certificate programs, 2 days for diploma/enhanced diploma, 2.5 days for bachelor programs).

ICBOC accepts cheques and money orders, payable to the Indigenous Certification Board of Canada or ICBOC. We also accepts Internet Interac payment to [admin@icboc.ca](mailto:admin@icboc.ca)

## SUBMITTING YOUR ACCREDITATION APPLICATION

**Please send completed forms and accompanying documents and correspondence to:**

Executive Administrative Assistant  
ICBOC  
P.O Box 3999  
Kanehsatake, QC  
J0N 1E0  
Phone: (450)983-8444  
Email: [adminasst@icboc.ca](mailto:adminasst@icboc.ca)