



FORM J

Course Approval Form for a Level 6 Certificate

IMPORTANT INFORMATION

- Please refer to the requirements for obtaining a Level 6 certificate on the next page before completing and submitting this form.
- Allow 20 to 25 business days for your request to be processed. We kindly request that you wait until this period has expired before asking us for update your file.
- Please allow 10 business days for us to respond to an inquiry.
- Please note that we do not accept photos of the form filled out by email. Please type your information and save the documents as PDF files and send them to us by e-mail OR send it to us the hardcopies by mail.

PERSONAL INFORMATION

Last Name			
First Name			
Middle Name			
Maiden Name			
Certification No.			
Date of Birth	YEAR:	MONTH:	DAY:
Phone Numbers	HOME:	WORK:	CELL:
Email address			
Mailing Address	No.	STREET:	APT.:
	CITY:	PROVINCE:	POSTAL CODE:

CREDIT REQUIREMENTS FOR UPGRADE TO A TEACHER'S CERTIFICATE 6

Applicants must first hold a Level 5 Teacher's Certificate.

The Level 6 Teaching Certificate requires a total of 180 university credit hours (excluding credit hours for practice teaching) and 30 approved graduate credits. The graduate credit hours must allow you to obtain:

- an approved master's degree in education (30 graduate credit hours)
- a master's degree in a teachable subject (30 graduate credit hours)
- a non-degree program with 30 graduate credits that leads to:
 - a additional major (24 credits),
 - two additional minors (18 credits each) or
 - an additional minor (18 credits) and a concentration (9 credits).

Please have your courses approved by Teacher Certification before taking them. When approved courses have been completed, an application for an upgrade certificate must be submitted using the appropriate Form (K), submitting an official transcript, and paying the fee.

SELECTED PROGRAM

<input type="checkbox"/>	Master of Education	Title:
<input type="checkbox"/>	Master's degree in a teachable subject	Title:
<input type="checkbox"/>	Non-degree program	Option: Additional Major (1): Option: Additional Minors (2): Option: Additional Minor (1) and Concentration (1):

COURSES SUBMITTED FOR APPROVAL

	Course Number	Course Title	Educational Institution	Credits	Approval by Teacher Certification
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
			TOTAL		

DECLARATION AND CONSENT

I certify that all information given on this application is true, correct, and complete to the best of my knowledge. I authorize any person, government, administration, educational institution, police force, military authority, governing body, or other organization inquired under this authorization to provide the New Brunswick Department of Education and Early Childhood Development with all relevant information or documentation requested. I accept responsibility for advising the Department, in writing, of any change to the information contained in this application.

Signature (Typing your name in this section serves as signature)	Date
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CONTACT INFORMATION

Mailing Address (For documents sent by mail)

Office of Teacher Certification
Department of Education and Early Childhood Development
P.O. Box 6000
Fredericton NB E3B 5H1

Physical Address (For documents sent by couriers such as Purolator, FedEx, UPS)

Office of Teacher Certification
Department of Education and Early Childhood Development
Place 2000
250 King Street
Fredericton NB E3B 9M9

Phone: (506) 453-2785

Fax: (506) 453-5349

Email: teachercertification@gnb.ca

FEBRUARY 2025