

FORM 612

Interim Teacher's Certificate 4 Application Form Policy 612

IMPORTANT INFORMATION AND DEADLINES

- Under Policy 612, you must hold a letter of recommendation from a school district.
- Applications are only processed after receipt of all required documents by the Office of Teacher Certification. Please allow 20 to 25 business days for your application to be processed. We kindly request that you wait until the end of this period before asking for an update on your file.
- The certificate will be valid as of July 2 if the application is submitted before October 31 of the same year (as evidenced by the postmark) and if the training program starts within the prescribed timeframe.
- The certificate will be valid as of January 2 if the application is submitted before March 31 of the same year (as evidenced by the postmark) and if the training starts within the prescribed timeframe.
- Form 612, confirmation of payment (if the fee is paid by e-Transfer), and a letter of recommendation from a school district may be sent to us by email: teachercertification@gnb.ca
- Please allow 10 business days for us to respond to a request for information.

PERSONAL INFORMATION

Last Name			
First Name			
Middle Name			
Maiden Name			
Gender	MALE <input type="checkbox"/>	FEMALE <input type="checkbox"/>	NON-BINARY <input type="checkbox"/>
Date of Birth	YEAR:	MONTH:	DAY:
Phone Numbers	HOME:	CELL:	WORK:
Email address			
Mailing Address	No.:	STREET:	APT/UNIT.:
	CITY:	PROVINCE:	POSTAL CODE:

UNIVERSITY EDUCATION

DEGREE	Number of credits	Major (without a minor: 30 credits – with a minor: 24 credits)	Minor (18 credits)	Institution	Graduating Year
Bachelor's degree other than Bachelor of Education					
Master's degree					
Other university degree Degree from CEGEP					

REQUIRED FEE AND SUPPORTING DOCUMENTS

- Documents to be mailed to Teacher Certification Office by applicant.
- ▲ Documents to be sent directly to Teacher Certification by institutions issuing them by email or mail.

- **Fee: \$70.00** (This fee is not required if you have applied for an interim teacher's certificate and paid the fee within the last three years.)

Money order or cheque, payable to the **Minister of Finance, Province of New Brunswick**
OR e-Transfer
Please provide proof of payment (screenshot of the transfer) with your form.

E-Transfer email: eecc-edpefinanceservices@gnb.ca

Please enter the following information in the message box when sending e-Transfer:

- Full name (including maiden name)
- Certification Form used: Teacher Certification Form 612
- Amount paid: \$70.00
- If you are asked to enter a question and password, then proceed. However, there is no need to advise us of the question and password as our system is set up for automatic deposit.

Customers of UNI and Desjardins credit unions are asked not to use e-Transfer and to pay by cheque or money order.

- ▲ **Official Transcript**

We must receive official transcripts from all the academic institutions you have attended, even if the credit hours have been transferred from one institution to another. Transcripts must be sent directly to the Office of Teacher Certification by institutions issuing them, either by **email, mail or fax**. You can also send a transcript in an **envelope sealed** by the institution. If submitting transcripts prior to graduation, please ensure all courses including the internship are graded. If a degree is intended, a letter must be provided from the institution's registrar's office indicating that the requirements have been met and graduation is expected.

- We only accept original transcripts. Copies and PDF versions provided by an applicant will not be accepted.
- We accept official transcripts sent by MyCreds only if they send to Teacher Certification the link to access them. Please check [MyCreds' FAQ](#) to know more on how to share your credentials with us.
- Candidates who have graduated from a CEGEP must ask the institution to send us their transcript.

Internationally trained candidates must request a course-by-course assessment of their degrees from WES or ICAS. The report must be submitted directly to the Office of Teacher Certification by WES or ICAS.

- **Original Criminal Record Check**

A criminal record check that includes a vulnerable sector screen is required from the Royal Canadian Mounted Police or your local police department. The criminal record check must have been done in the 12 months preceding the date of the signature of this form. **You must provide the original document. Copies are not accepted.**

- if you received a **paper version** of the criminal record check, you must **mail** the original one directly to the Teacher Certification Office. Scanned copies sent by email are not accepted.
- If you only received an **electronic version** of your criminal record check, you must provide the authentication method to verify the document by email (i.e., QR codes, electronic signatures, etc.).
- If requested by the police service, the Teacher Certification Office may provide you with a letter of support to request a vulnerable sector check. To do so, please send us an email with your full name.

● **Employability status**

Applicants who do not have Canadian citizenship or a Permanent Resident Card must provide an authenticated copy of their Work Visa.

● **Letter of recommendation from the School District**

This letter must be prepared and signed by a representative of the school district, not by a school principal.

Which university will you attend to obtain your Bachelor of Education?

Are you already enrolled in a Bachelor of Education program?
If so, please indicate the program.

Yes _____
 No

The Office of Teacher Certification reserves the right to request other documents.

PERSONAL BACKGROUND INFORMATION

For every affirmative answer (yes), please attach a written explanation on a separate piece of paper, referencing the question number.

1.	<input type="checkbox"/> Yes <input type="checkbox"/> No	Have you ever been convicted, given an absolute or conditional discharge, or received a pardon for a criminal offense?
2.	<input type="checkbox"/> Yes <input type="checkbox"/> No	Are there any outstanding criminal charges against you?

DECLARATION AND CONSENT

I declare that all information given on this registration form is true, correct, and complete to the best of my knowledge. I understand that no qualifications assessment can be made until the New Brunswick Department of Education and Early Childhood Development receives all required documents, and that additional information may be required.

I authorize the New Brunswick Department of Education and Early Childhood Development to contact the educational institutions I have attended and to receive any and all information from those institutions, teacher registration/licensing bodies, and police services that relate to my application for registration. I understand that this information may be used by the department to determine if I will be registered or if any terms, conditions, or limitations are required on my certificate.

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.

I declare that all documentation submitted by me in relation to my application has not been changed or altered in any way.

I confirm that I have read all the requirements for teacher certification with the New Brunswick Department of Education and Early Childhood Development.

Applicant's signature: _____ Date: _____
(Typing your name in this section serves as signature)

Printed Name: _____

Submission of an application that is misleading or false, in whole or in part, may lead to non-issuance, suspension or cancellation of the teacher's certificate.

The applicant is required to advise the New Brunswick Department of Education and Early Childhood Development of any change in circumstances relating to the questions raised in the Personal Background Information section of this application. A failure to do so may result in the suspension or cancellation of the teacher's certificate.

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

DECEMBER 2024