



Registrar's Office  
62 York Street, Sackville, NB  
Canada, E4L 1E2  
(506) 364-2269 (phone)  
(506) 364-2272 (fax)

Last Name	First /Preferred Name	Middle Name	E-mail Address	Phone Number ( )	Student ID #
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**Please Note:**

- Students applying for an Honours Program must declare their intention **in year three, by December.**
- Please note that at time of application, to be considered for Honours, students should have achieved a minimum CGPA of approximately 3.0 on all course work in the prescribed Honours program and an Overall GPA of approximately 3.0 on all courses undertaken beyond first year.
- Please submit the completed form to the Registrar's Office. The application will be forwarded to the appropriate Department for signed approval of the Department Head. You will be notified of the status of your application to pursue Honours sometime after final grades for the current academic year have been received pending receipt of Departmental approval.

**Current Degree Program according to Connect@MTA:**

- Bachelor of Arts
  Bachelor of Science
  Bachelor of Commerce

**Current Major(s):** \_\_\_\_\_

**Current Minor(s):** \_\_\_\_\_

I wish to Pursue Honours beginning in the Fall of the year 20\_\_\_\_\_

**I declare my intention to Pursue Honours as follows:**

**Bachelor of**  Arts  Science  Commerce; **Honours in** \_\_\_\_\_

**I wish to pursue an Honours program that is:**  Course-based (if applicable)  Thesis-based (if applicable)

Please indicate if you are completing a second major in addition to your honours program:

**Additional Major in** \_\_\_\_\_

Please indicate if you are also completing a Minor(s):

**Minor(s):** \_\_\_\_\_

Which Academic Calendar are you following to complete your degree requirements? (See 6.1.3) \_\_\_\_\_

*Note: Unless otherwise requested, it is assumed students are following the Calendar under which they entered or were re-admitted to Mount Allison.*

**Student Signature**

**Date**

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