

Registrar's Office 62 York Street Sackville NB E4L 1E2 Phone: (506) 364-2269 Fax (506) 364-2272 advisor@mta.ca

2019-2020 DEGREE AUDIT FORM

Bachelor of Arts – Art History

<u>Distribution requirements</u> – 24 credits earned as follows:

	credits) from each of the four areas. Only one course ay be used to fulfill distribution requirements.	(3 credits) from a single discipline (subject
Arts 6 credits from	CANA 1011	Note: If a student is placed in a language course at a higher level than the course listed for distribution, then the course at the higher level may be counted.
Humanities ☐ 6 credits from	VCMS 1201	681
Natural Science ☐ 6 credits from	BIOC 1001 BIOL 1201 CHEM 1001 COMP 1631 ECON 1701 GENS 1401 MATH 1111 1151 1251 2311 PHIL 2611 PHYS 1021 1031 1041 1051 1401 PSYC 1001	Note: Exceptions, including 1991 courses and non-designated 1000 level transfer credits, may be approved by a Dean in consultation with the appropriate Department.
Social World ☐ 6 credits from	ANTH 1011	Note: Courses used for distribution may also be counted towards honours, major or minor requirement where applicable



Registrar's Office 62 York Street Sackville NB E4L 1E2 Phone: (506) 364-2269 Fax (506) 364-2272 advisor@mta.ca

d / m / y

2019-2020 DEGREE AUDIT FORM

Bachelor of Arts - Art History

Ī		Last Name	First /Preferre	d Name	E-mail Addres	5	Student ID			
	0	120 credits required in total f	or the degree	□ 36 of w	rhich must be from 3	/4000 lev	el courses			
MAJOR, Art History - 60 credits earned as follows:										
		6 credits from FINH 2101 □	2111 🗖							
	☐ 36 credits from Art History at the 3/4000 level or from									
		CLAS 3621 □	CLAS 3631 🗖	CLAS 3701	☐ CLAS 3711 ☐					
		ENGL 3621	FREN 2801□	GERM 270	I□ HIST 4001 □	PHIL 2	2401 🗖			
				_						
		18 credits from complementa Program Advisor:	ary courses in Arts	& Letters and	Humanities, choser	in cons	ultation with the			
MI	NOF	R : 24 credits □	Courses:							
If your program contains any deviations from that prescribed in the Calendar indicate the specific change(s) below. Details of variances approved by the appropriate Program Advisor/Department Head or Academic Dean must also be sent to the Registrar or Academic Advisor by email.										
Stu	dent	Signature:	Program Adviso	r's Signature:		Date:				

(Advisor's Printed Name) _____