

(Advisor's Printed Name) _

2022-2023 CERTIFICATE AUDIT FORM Registrar's Office 62 York Street Sackville NB E4L 1E2 Phone: (506) 364-2269 Fax (506) 364-2272 advisor@mta.ca

Studies of Indigenous History

	Last Name	First /Preferred Name	E-mail Address	Student ID
See section 11.10.1, 11.10.2, and 11.10.3 of the Academic Calendar for detailed information on available certificates. Please note that you are responsible for ensuring that your registration meets all requirements.				
<u>CERTI</u>	FICATE, Studies of Indigenous	s History - 18 credits earned as f	ollows:	
	3 credits from:			
	INDG 1001 □			
	3 credits from:			
	INDG 2801 □			
	3 credits from:			
	INDG 2001 □ 3111 □			
	3 credits from:			
	INDG 2901 □ 3901 □			
	6 credits from:			
	INDG 3111 🗖 3831 🗖 3821	□ 3841 □ 4801 □		
sectio	n), indicate the specific change	tions from that prescribed in the e(s) below. Details of variances apsent by email to advisor@mta.ca.		
Student Signature: Date:				
Program Advisor's Signature:				