

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

2023-2024 CERTIFICATE AUDIT FORM

Diversity, Equity, and Inclusion

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.			
CERTIFICATE, Diversity, Equity	y, and Inclusion - 18 credit	s earned as follows:	
☐ 9 credits from the following:			
SOCI 2111 🗆 2121 🗖 2	2211 🗆 2221 🗆 2231 🗖 :	2401 🗆 2501 🗖 2611 🗖	
☐ 3 credits from the following:			
SOCI 3101 🗖 3511 🗖 🗧	3551 🗖 4551 🗖 4561 🗖		
☐ 3 credits from the following:			
SOCI 3701 🗖 3711 🗖 3	731 3 781 3 791 3		
☐ 3 credits from the following	j :		
SOCI 3771 🗖 4701 🗖			
If your certificate contains any deviations from that prescribed in the Academic Calendar (see Certificate Programs section), indicate the specific change(s) below. Details of variances approved by the appropriate Program Advisor/Department Head or Academic Dean must also be sent by email to advisor@mta.ca.			
Student Signature:		Date:	
Program Advisor's Signature:			
(Advisor's Printed Name)			