

**2025-2026
DEGREE AUDIT FORM**

Bachelor of Arts – Cognitive Science

| Last Name | First /Preferred Name | E-mail Address | Student ID |
|-----------|-----------------------|----------------|------------|
|-----------|-----------------------|----------------|------------|

See sections 11.2.1 and 11.2.2 of the Academic Calendar for a list of the BSc Degree requirements. Please note that you are responsible for ensuring that your registration meets all requirements for graduation.

Degree Program: 120 credits ☐ 36 credits at 3/4000 level ☐

Distribution requirements (6 credits from each area):

Arts & Letters ☐ _____ ☐ _____ Humanities ☐ _____ ☐ _____
Social Science ☐ _____ ☐ _____ Science ☐ _____ ☐ _____

MAJOR, Cognitive Science - 60 credits earned as follows:

- ☐ 9 credits from COMP 1631 ☐ 1731 ☐ 2611 ☐
- ☐ 3 credits from COMP 2711 ☐ 2931 ☐
- ☐ 9 credits from PSYC 1001 ☐ 1011 ☐ 2201 ☐
- ☐ 6 credits from PSYC 2101 ☐ 3111 ☐ 3201 ☐ 3211 ☐ 3101 ☐ 4101 ☐
- ☐ 6 credits from PSYC 2001 ☐ (or MATH 1311 ☐) PSYC 2011 ☐ (or MATH 2321 ☐)
- ☐ 6 credits from PHIL 2511 ☐ 3511 ☐
- ☐ 3 credits from PHIL 4511 ☐ 4521 ☐
- ☐ 3 credits from LING 3001 ☐ 3011 ☐ PSYC 3221 ☐
- ☐ 15 credits from the following, with at least 12 being at the 3/4000 level:
COMP 3651 ☐ 3851 ☐ 3611 ☐ MATH/COMP 2211 ☐ 3531 ☐
PHIL 2611 ☐ 3221 ☐ 3231 ☐ 3351 ☐ 3631 ☐ 3711 ☐ 4611 ☐

Note 1: Students pursuing this program are reminded that regulation 11.2.3 must still be fulfilled.

HONOURS, Cognitive Science - 75 credits earned as follows:

- ☐ 60 credits as in the Major
- ☐ 6 credits from COGS 4990
- ☐ 9 additional credits from the following, with at least 6 credits chosen from a single discipline chosen in consultation with the Program Advisor
COMP 3651 ☐ 3851 ☐ 3611 ☐ 4951 ☐ PHIL 3221 ☐ 3231 ☐ 3351 ☐ 3631 ☐ 3711 ☐ 4511 ☐ 4521 ☐ 4611 ☐ 4951 ☐
PSYC 3001 ☐ 3101 ☐ 3111 ☐ 3201 ☐ 3211 ☐ 4101 ☐ 4951 ☐

MINOR: 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 by email to advisor@mta.ca.

Student Signature: _____ Program Advisor's Signature: _____ Date: _____
(Advisor's Printed Name) _____ d / m / y