

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

2025-2026 DEGREE AUDIT FORM

Bachelor of Science – Biology

	Last Name		First /Prefe	rred Name	E-mail Address	Student ID
for ens	suring that your re	egistration me	ets all requirements for	or graduation.	-	note that you are responsible
-	Program:			Science credits	30 Science credits a	t 3/4000 level
	ution requiremen	-	-			
			[]		S 🛛 🗋	
So	ocial Science 🗆 _		🛛			
MAJOF	<u>R, Biology</u> - 60 cro	edits earned a	s follows:			
	6 credits from	BIOL 100	1 🗖 1501 🗖			
	3 credits from		1 🗆 1041 🗖			
	3 credits from		1 🗆 1151 🗖			
	□ 3 credits from MATH 1121 □ 1251 □ 1311 □ 2211 □ 2221 □ COMP 1631 □					
	3 credits from	CHEM 100	1 🗖			
	3 credits from	BIOC 100	1 🗖			
	9 credits from	BIOL 210	1 🗖 2701 🗖 2811 🗖			
	9 credits from	BIOL 220	1 🗖 2301 🗖 2401 🗖	BIOC 2001 🗖		
	21 credits from E	Biology at the 3	4000 level (Up to 6 credi	its of this requirement	may be obtained from the followin	g courses: BIOC 3041, BIOC 3501,
	: additional 3/400) level courses	are needed to fulfill cale	endar regulation 11.	3.5. * Note 2 : BIOC 2001 is a p	prerequisite for several 3/4000
	9 credits from	he Major BIOL 4903 🗖		nsultation with the F	Program Advisor	
MINOR	: 24 credits 🗖					
			rom that prescribed in the ad or Academic Dean musi			tails of variances approved by the
Student	Signature:		Program Adviso	or's Signature:	Date	·
			(Advisor's	Printed Name)		_ d / m / y