

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

2025-2026 CERTIFICATE AUDIT FORM

Community Engaged Learning

	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.					
CER	TIFICATE, Community Eng	gaged Learning - 18 credits	earned as follows:		
	9 credits from:				
	CENL/RELG 1001				
☐ 6 credits from the following:					
	CANA 2201	PSYC 2301	J 2431□ 3801□ J 3981□ 3911□		
	3 credits from:				
	CENL/RELG 4001 🗖 CE	NL 4101 🗖 GENV 4521 🗆	SOCI 4311 🗖 4971 🗖		
section		tions from that prescribed in the e(s) below. Details of variances apsent by email to advisor@mta.ca.			
Stud	ent Signature:		Date:		
Prog	ram Advisor's Signature:				
(Adv	isor's Printed Name)				