

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

2024-2025 CERTIFICATE AUDIT FORM

Mi'kmaq Studies

Г	Last Name	First /Preferred Name	E-mail Address	Student ID
	Last Ndille	Flist/Fleielleu Nallie	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, Mi'kmaq Studies - 18 credits earned as follows:

3 credits from:

INDG 1001 🗖

G 6 credits from:

MKMW 2001
INDG 3111

3 credits from:

INDG 2901 🗖 3901 🗖

6 credits from:

INDG 2881 🗖 3301 🗖 MKM

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) _____