REQUEST FOR DEGREE ADVICE

Completed Degree Audits will be emailed to your @mun.ca email address

LAST NAME

FIRST NAME

STUDENT NUMBER

PHONE NUMBER

E-mail Address: ____________________________@mun.ca

ACADEMIC PROGRAM INFORMATION

Degree Program: ____________________________ □ General □ Honours

Major 1: ____________________________ Major 2: ____________________________

Joint Major (Science only): ____________________________

Minor: ____________________________

PLEASE NOTE:
1) If you are also completing another undergraduate degree from this University, please note that in addition to satisfying the separate requirements of each degree, you must also complete, at this University, 30 credit hours beyond those required for the first degree which are applicable to the degree sought.
2) Students with less than 30 credit hours are encouraged to visit the Academic Advising Centre.

Signature: ____________________________ Date: ____________________________

ESU-101-02 17
08-2019