



**Access to Information and Protection of Privacy** - The information on this form is collected under the authority of the *Memorial University Act (RSNL 1990 Chapter M-7)* and is needed for and will be used to update your student record. If you have any questions about the collection and use of this information contact the Associate Registrar, Registration and Enrolment Services at 864-8260.

## DECLARATION / CHANGE OF ACADEMIC PROGRAM CERTIFICATES IN THE FACULTY OF HUMANITIES AND SOCIAL SCIENCES

Student Number

Last Name

First Name

@mun.ca

Date

Student Signature

E-mail Address

### NOTES:

1. All Certificate programs can be declared by emailing the completed form to [reghelp@mun.ca](mailto:reghelp@mun.ca) or by returning the completed form to the Office of the Registrar
2. If you require assistance with completing this form, contact the Academic Advising Centre or the Office of the Registrar.
3. For changes in the academic program to be processed in time for registration for a given semester, this form must be submitted at least one week prior to your registration time for that particular semester.

**SECTION 1. HUMANITIES AND SOCIAL SCIENCES, FACULTY OF**  in addition to my current program  
**(Certificates)**  replacing my current program

- Certificate in Ancient Languages
- Certificate in Criminology
- Certificate in Film Studies
- Certificate in Food Studies
- Certificate in Indigenous Studies
- Certificate in Newfoundland and Labrador Studies
- Certificate in Public Policy