

**2026-2027  
CERTIFICATE AUDIT FORM**

**Music Education**

---

Last Name	First /Preferred Name	E-mail Address	Student ID
-----------	-----------------------	----------------	------------

---

See section 11.11.1, 11.11.2, and 11.11.3 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, Music Education - 18 credits earned as follows:**

12 credits from:

MUSC 2301  3361  3311  4311

3 credits from:

MUSC 3411  3421

3 credits from:

MUSC 3321  3331  3341  3351

---

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) \_\_\_\_\_