

Processed by:

## **Certificate Program Application**

Student Information:												
Last Name:									First Name:			
Student ID:	Α								Email:			
Please Note:												
<ul> <li>The following Certificate programs are intended for current students, persons already holding degrees in any discipline, or students with relevant work experience.</li> </ul>												
Approved forms will be sent to <u>records@smu.ca</u> for processing.												
If not currently registered in a program at Saint Mary's University, please contact the Admissions Office.												
o Email: <u>admissions@smu.ca</u>												
Certificate Programs (Select One): Where to send for approval:												
Atlantic Ca	canada Studies									<u>B</u> ,	Aadvising@smu.ca	
Chinese St	tudies*									BAadvising@smu.ca		
Forensic P	Psychology									Advisor.science@smu.ca		
German St	tudies*								BAadvising@smu.ca			
Health, We	Vellness & Sport in Society								<u>B</u> ,	BAadvising@smu.ca		
Human Re	an Resource Management – Management Option								tion	bcomm.advising@smu.ca		
Human Re	Human Resource Management – Psychology Option									Advisor.science@smu.ca		
Japanese 9	Studies*									BAadvising@smu.ca		
Linguistics	*									BAadvising@smu.ca		
Spanish La	anguage and Hispanic Cultures*									BAadvising@smu.ca		
Sport Busi	ness									bcomm.advising@smu.ca		
Sustainabi	ability Business <u>bcomm.advising@smu.ca</u>										comm.advising@smu.ca	
*Students majoring or minoring in the certificate discipline are not eligible for the program.												
Student Signatur	e:									Date:		
Academic Advi	sing	Offi	ice:									
Representative N												
Representative S	Representative Signature:									Date:		
Records Office:												

June 2024

Date: