



Declaration Certificate/Diploma Program (second credential)

Registrar's Office Halifax NS B3M 2J6 (902) 457-6117 FAX (902) 457-6498
registration@msvu.ca

Use this form to declare a second credential such as a Certificate or Diploma. Complete the form, obtain a signature from the Modern Languages Department Chair if declaring a French certificate, and return the form to the Registrar's Office.

Student ID# _____ Last Name _____ First Name(s) _____

Apartment/Street _____ Town/City _____ Province _____ Postal Code _____

Current Program of Study _____ (_____) Phone Number _____ Mount Email Address _____

☐ Declaring Certificate

I am:

- | | |
|---|---|
| <input type="checkbox"/> Adding | <input type="checkbox"/> Proficiency in French* |
| <input type="checkbox"/> Replacing existing | <input type="checkbox"/> Advanced certificate of Proficiency in French* |
| <input type="checkbox"/> Deleting | <input type="checkbox"/> Accounting |
| | <input type="checkbox"/> Business Administration |
| | <input type="checkbox"/> Tourism and Hospitality Management |
| | <input type="checkbox"/> Community Leadership |
| | <input type="checkbox"/> Marketing |

***For French certificates only:**

Modern Languages Department Chair's Approval Signature

Approval Date

☐ Declaring Diploma

I am:

- | | |
|---|---|
| <input type="checkbox"/> Adding | <input type="checkbox"/> Business Administration |
| <input type="checkbox"/> Replacing existing | <input type="checkbox"/> Tourism and Hospitality Management |
| <input type="checkbox"/> Deleting | |

Please check myMount to confirm your declaration/change.

Date

Student Signature

Mount Saint Vincent University abides by the Personal Information Protection and Electronic Documents Act (PIPEDA) and the Freedom of Information and Protection of Privacy (FOIPOP) Act. For further information on these acts, please refer to the University Calendars.

Last updated February 16, 2024