



# Retail Management Certificate

## Standard Application for WAFC Certificate of Completion

Name: \_\_\_\_\_

Home Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Employer/Job title (if applicable): \_\_\_\_\_

\* \* \* \* \*

### Instructions to applicant:

**Note:** Before submitting the Retail Management Certificate application, it is advisable to contact the Retail Management Certificate representative from your Community College to ensure your completion of the approved coursework.

1. Contact your Community College to apply for the college-issued certificate.
2. Complete the Retail Management Certificate Graduate Survey (Website link below)  
<http://retailmanagementcertificate.com/for-graduates/take-graduate-survey/>
3. Complete both pages of this certificate application
4. Acquire the signature of a faculty/administrative member at the college you have most recently attended, certifying:
  - All courses were completed with a passing grade of "C" or better
  - All courses meet the WAFC required course list

**OR**

  - Provide a copy of your College Retail Management Certificate **and**
  - Provide a copy of college transcript as proof of passing grades ("C" or better).
5. Submit the completed application and documentation\* for approval and issuance of the WAFC Certificate:
  - to your Human Resources Department if your company participates in the Retail Management Program.
  - directly to the WAFC office if you are applying independently of a company.
    - Electronic Mail to: [RMC@wafc.com](mailto:RMC@wafc.com)
    - Regular Mail to:  
Attention: Retail Management Certificate  
Western Association of Food Chains  
4010 Watson Plaza Drive, Suite 211  
Lakewood, California 90712

*\*We recommend retaining copies of all documents for your records.*

Please allow 4-6 weeks for your application to be process and certificate issued.

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## Standard Application for WAFC Certificate of Completion

**TO BE COMPLETED BY STUDENT, or COLLEGE, or HR DEPARTMENT:**

WAFC Generic Course Title:	Name of College Attended	Grade Rec'd	Semester Completed
	Corresponding Course Title/#		
1. Human Relations in Business (or Organizational Behavior) (BA107)			
2. Business Technology (Computer Applications) (BA132)			
3. Business Communication (Oral/Written) (BA156)			
Or: Oral Communication (Speech) and: Written Communication (English)			
4. Principles of Management (BA115)			
5. Principles of Marketing (BA114)			
6. Human Resources Management (BA106)			
7. Financial Management/Budgeting (BA120)			
Or: Business Math (or Higher Level) and: Accounting (Intro, financial, managerial)			
8. Retail Management (BA118 or (Capstone Project Course) BA123)			

*My signature below confirms that the detail regarding the coursework (listed above) is, to the best of my knowledge, accurate. If needed to prove course and grade accuracy (per instruction #4), I have attached the college certificate and appropriate college transcripts.*

Student: \_\_\_\_\_  
(PLEASE PRINT NAME HERE)

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### **TO BE COMPLETED BY COLLEGE REPRESENTATIVE**

*The above named student has completed the courses listed above with a passing grade of "C" or better. Further, I have confirmed that, to the best of my knowledge, the outcomes for each course are at least a 70% match to the WAFC required course outcomes.*

College Representative: Wendy Wright Title: Cerritos RMP Manager  
(PLEASE PRINT NAME HERE)

Signature: \_\_\_\_\_ Phone #: 562-860-2451 Date: \_\_\_\_\_

# CERRITOS COLLEGE



## Petition for Certificate of Achievement

Student ID Number \_\_\_\_\_

Fall \_\_\_\_\_ 2018 \_\_\_\_\_  
 Semester Year Academic Plan / Major

PRINT NAME CLEARLY & EXACTLY AS IT IS TO APPEAR ON THE DIPLOMA

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First Name

Middle Name

Last Name

Email Address: \_\_\_\_\_ @ \_\_\_\_\_ Message Phone: \_\_\_\_\_

Student Signature: \_\_\_\_\_ Date \_\_\_\_\_ Date of Birth : \_\_\_\_/\_\_\_\_/\_\_\_\_

List of other colleges attended: \_\_\_\_\_

**Do NOT write below this line (STAFF USE ONLY)**

Subject Requirements Still to be Met:

<u>Course Name</u>	<u>Units in Progress</u>	<u>Incomplete Units</u>
<b>Total Units</b>		

Comments: \_\_\_\_\_

Academic Plan (Major Code)

Major _____	Catalog Year: _____
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**Units & Grade Summary:**

SEMESTER ENDING	Attempted	Earned	Grade	GPA

Comments: \_\_\_\_\_

Evaluator Signature: \_\_\_\_\_ Date : \_\_\_\_\_

**A & R Staff Use Only**

- |   |  |
|---|--|
| <input type="checkbox"/> Degree Name        | <input type="checkbox"/> Postcard Sent                     |
| <input type="checkbox"/> Pending            | <input type="checkbox"/> Certificate Mailed ____/____/____ |
| <input type="checkbox"/> Certificate Posted |  |
| <input type="checkbox"/> Matriculated       |  |

**Status of Petition:**      Approved      Denied      Withdrawn  
           

\_\_\_\_\_  
 Graduation Evaluator Date