 **Retail Management Certificate**

**Application for Industry Certification**

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

Home Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Employer (if applicable): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Job Title (if applicable): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 By checking this box, I confirm completion of the [RMC Graduate Survey](https://retailmanagementcertificate.com/for-graduates/take-graduate-survey/) as requested below.

**Instructions to applicant:**

***Note:******You are applying for the Industry Certification in Retail Management (WAFC). This credential is only available to students who have successfully completed the Retail Management Certificate Program through a WAFC-approved community college. You will need to involve the Retail Management Certificate representative from your Community College to ensure your coursework is approved.***

1. Contact your Community College to apply for the college-issued certificate (approved by WAFC).
2. Complete the Retail Management Certificate Graduate Survey (Website link below).

 <https://retailmanagementcertificate.com/for-graduates/take-graduate-survey/>

1. Complete both pages of this certificate application.
2. Provide verification that all classes taken were WAFC-approved and were completed with a grade of “C-” or better using one of the two options listed below:
* Option A: Legibly fill-in course information on Page 2 and acquire the signature of the RMC Program faculty/advisor at the approved college you attended.
* Option B: Legibly fill-in course information on Page 2 and provide a copy of your college Retail Management Certificate along with a copy of your college transcript.
1. Submit the completed application and any applicable documentation mentioned above for approval and issuance of the WAFC Certificate to the WAFC’s Graduate Processing Specialist via:
	* ***Electronic Mail:***

Send to both RMC@wafc.com *AND* rmcgrads@wafc.com

*OR*

* + ***Regular Mail:***

Attention: Retail Management Certificate

Western Association of Food Chains

4010 Watson Plaza Drive, Suite 205

Lakewood, California 90712

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

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

**Retail Management Certificate**

 **Application for Industry Certification**

**TO BE COMPLETED BY STUDENT or COLLEGE PROGRAM REPRESENTATIVE**:

|  |  |  |  |
| --- | --- | --- | --- |
| **WAFC Generic Course Title:** | **Top line: Name of College Attended** | **Grade****Rec’d** | **Semester/Year Completed** |
| **Bottom: Corresponding Course & Title/#** |
| 1. Human Relations in Business

(or Organizational Behavior) |  |  |  |
|  |
| 1. Business Technology

(Computer Applications) |  |  |  |
|  |
| 1. Business Communication

(Oral/Written/presentation skills combined) |  |  |  |
|  |
| 1. Principles of Management
 |  |  |  |
|  |
| 1. Principles of Marketing
 |  |  |  |
|  |
| 1. Human Resources Management
 |  |  |  |
|  |
| 1. Financial Management/Budgeting
 |  |  |  |
|  |
| 1. Retail Management

(Capstone Project Course) |  |  |  |
|  |
| \*Students who started the program prior to 2013 may complete the Business Communication requirement with a combination of Oral/Written Communications. These students may also complete the Financial Management requirement with a combination of Busines Math and Accounting. |

*My (wet or electronic) 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 OR TYPE NAME HERE)

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

 (WAFC APPROVES WET OR ELECTRONIC SIGNATURE.)

TO BE COMPLETED BY COLLEGE REPRESENTATIVE

*The above-named student has completed each course 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 Rep’s Name/Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ of: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (PLEASE PRINT OR TYPE NAME HERE) (COLLEGE NAME)

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (WAFC APPROVES WET OR ELECTRONIC SIGNATURE.)