



WALGREENS CERTIFICATE IN RETAILING LEADERSHIP APPLICATION

A copy of your transcript must accompany this application.

GENERAL INFORMATION

Name (first, middle, last):	Student ID Number:	
Local Address (Street Address):		
City, State, Zip Code:	Phone Number:	
Email:		
Major:	Graduation Date:	GPA:
How Would You Like Your Name Printed on the Certificate: (Please Print)		

CERTIFICATE REQUIREMENT INFORMATION

REQUIRED COURSES	SEMESTER COMPLETED	FINAL GRADE
Introduction to Retailing Systems and Management - MAR 3231		
Retail Management Seminar - MAR 2290		
Principles of Management - MAN 3025		
Principles of Marketing - MAR 3023		
Business Finance - FIN 3403		
Problem Solving Using Computer Software – CGS 2531		
Retail Internship - MAR 4945 (Credit Opptional)		

The Center for Retailing Education and Research Undergraduate Committee has my permission to obtain additional GPA and course information.

 Date of Application

 Signature of Applicant