



► Please read application instructions. Please print and complete the form.

A NAME			
1. Mr. <input type="checkbox"/> 2. Mrs. <input type="checkbox"/> 3. Miss <input type="checkbox"/>		Ryerson Student Number (Current/Previous, if applicable)	
4. Ms. <input type="checkbox"/> 5. Dr. <input type="checkbox"/> 6. Other <input type="checkbox"/>			
Legal Surname		Other/Previous Surname(s)	
Legal First Name	Legal Middle Name	Third Initial	

B MAILING ADDRESS				
Notice of any change is required in writing to the office of Enrolment Services and Student Records.				
Apt.	Number	Street		
City or Town		Province	Postal Code	Country
Home Phone ()		Work Phone () ext.		Fax ()
Email Address:				

C - 1 EDUCATION HISTORY Part 1	
Complete the section that applies to your background (one of sections 1, 2, or 3 is required):	
1. Ryerson Certificate in Accounting – Finance completed?	Yes <input type="checkbox"/> Year: ____
2. Undergraduate Degree completed?	Yes <input type="checkbox"/> Year: ____
Program Name: _____	
Institution: _____ Transcript attached? Yes <input type="checkbox"/>	
3. Three year college diploma completed?	Yes <input type="checkbox"/> Year: ____
Program Name: _____	
Institution: _____ Transcript attached? Yes <input type="checkbox"/>	
Note: If courses have been taken at an institution other than Ryerson University, transcripts must be attached before acceptance of this application can be approved.	

C - 2 EDUCATION HISTORY Part 2

Prerequisites completed (included in or in addition to one of the above):

Applicants must have completed ALL the prerequisites before they can be admitted to this certificate.	Ryerson Grade	Other University/College	
		Course Code	Grade
CACC 414 Intermediate Accounting I			
CECN 104 Introductory Microeconomics			
CECN 204 Introductory Macroeconomics			
CFIN 300 Managerial Finance I			
CFIN 401 Managerial Finance II			
CLAW 122 Business Law			
CQMS 102 Business Statistics I			
CQMS 202 Business Statistics II			

D DECLARATION

Please note that your application will not be processed without the appropriate documentation.

I have read and understood the application instructions, and my signature below indicates that all responses are true and accurate. No relevant information, academic declaration or citizenship, status in Canada, or any other information, has been withheld, otherwise my admission to or registration at Ryerson University may be revoked.

Applicant Signature: _____ Date: _____

Note: This application will not be processed unless it is signed and dated.

OFFICE USE ONLY

Approval: _____ Date: _____

Completed application form and all necessary documentation should be submitted to:

Dr. Allen Goss, Academic Coordinator
The G. Raymond Chang School of Continuing Education
RYERSON UNIVERSITY
350 Victoria Street
Toronto, ON M5B 2K3

Fax: 416.979.5000, ext. 2424
Email: alg@ryerson.ca