**Program Application for Admission**

**Fall 2015 Session**

* Application Deadline: **July 31, 2015**
* Visit 1: **September 15-18, 2015**
* Visit 2: **November 10-13, 2015**
* Visit 3: **January 12-15, 2016**

**Spring 2015 Session**

* Application Deadline: **December 31, 2014**
* Visit 1: **February 10-13, 2015**
* Visit 2: **April 14-17, 2015**
* Visit 3: **June 16-19, 2015**

**Tuition: $12,500 (NRHA Member) - $13,500 (Non-Members) – Paid in Advance**

**Application Process** – Candidates apply by filling out this application form and submitting it to NRHA, along with a $1,500 space reservation deposit (nonrefundable). Applications are required five weeks before the program start date. Admission is on a first-come, first-serve basis and is based upon the date of receipt of this form along with space reservation deposit.

**Admission Requirements** – Students who apply for admission will be accepted based upon evaluation by the Program Managers. If the applicant is not accepted into the program after going through the application process, the space reservation deposit will be refunded in full. Submission of this form indicates that both the student and business owner understand and agree to the time and financial commitments required.

**Mail Your Completed Application for Admission to:**

NRHA Retail Management Certification

Attn.: Program Manager

6325 Digital Way, Suite 300

Indianapolis, IN 46278

**Or, email your form to:** [**swright@nrha.org**](mailto:swright@nrha.org)

**For more information**: Contact Scott Wright at 317-275-9417 or email at swright@nrha.org.

**Applicant Information**

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Last Name First Name Preferred Name

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Company Department/Division Title

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Business Address

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City State Zip

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Business Phone Cell Phone email

**Business Owner (Student Sponsor) Information**

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Last Name First Name Title

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Company

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Business Address

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City State Zip

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Business Phone Cell Phone email

**Student Information: Check the box the best describes your current position:**

* Accounting/Finance/Control
* Administration/HR
* IT/Technical
* General Management
* Marketing/Sales
* Operations/Production
* Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Education History**

Degree Received Major Institution Dates of Attendance

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**List formal courses, seminars and other development activities completed in the last 10 years, most recent first.**

Activity Sponsor Year Length of Program

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**Work History**

Position Company # Direct Reports Date

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**Acceptance**

Your signature below indicates that you attest to the accuracy of the statements made on this application and you grant us permission to contact anyone listed on this application for verification.

**Your Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Business Owner Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**