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**Supplementary Application Form**

**Applying for Admission in May, 20**\_\_\_

1. From your transcripts, please list the course numbers, names, and grades achieved for the following admission requirements. If courses have not been completed, please fill in the date you expect to complete them in the grade achieved column.

|  |  |  |  |
| --- | --- | --- | --- |
| **Requirement** | **Institution Taken At** | **Course Name & Number** | **Grade**  **Achieved** |
| Introductory Financial Accounting |  |  |  |
| Introductory Management Accounting |  |  |  |
| Economics |  |  |  |
| Statistics |  |  |  |
| Intermediate Financial Reporting I |  |  |  |
| Intermediate Financial Reporting II |  |  |  |
| Advanced Financial Reporting |  |  |  |
| Corporate Finance |  |  |  |
| Audit and Assurance |  |  |  |
| Taxation |  |  |  |
| Intermediate **AND/OR** Advanced Management Accounting |  |  |  |
| Performance Management |  |  |  |
| Business Law |  |  |  |
| Information Technology |  |  |  |
| Data Analytics and Information Systems |  |  |  |

2. (a). Do/Will you have any summer or co-op work Yes \_\_\_\_\_ No \_\_\_\_\_

Experience from a CPA Pre-approved training office or a through the experience verification route**[[1]](#footnote-1)**?

If ‘*Yes’,* please complete the following. If *‘No’* please proceed to 2(b).

Start Date

Total months of experience

Name of Firm

Location

(b). When did/will you begin full-time articling (*other*

*than summer or co-op work term experience*)

at a CPA Pre-approved training office or a through

the experience verification route?

Name of Firm

Location

(c). Total of articling months (including

summer and co-op work term experience)

by May 1 (*of the year you are applying for*)

Other information not required for the application; however, we appreciate your feedback:

3. (a). Did you attend a campus recruiting event hosted by the Edwards MPAcc program?

Yes \_\_\_\_\_ No \_\_\_\_\_

(b). If so, which event did you attend? (ie. information session at which University, career fair, etc.)

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4. How did you originally hear about MPAcc?

Professor\_\_\_\_ Colleague\_\_\_\_ Advertisement\_\_\_\_ Self Research\_\_\_\_

If you were referred by an MPAcc alumni, please provide their name, email, and workplace and we will be sure to thank them.

Name:

5. In a few words, tell us why you are interested in the Edwards’ MPAcc program.

1. [↑](#footnote-ref-1)