ROSS MACC PREREQUISITE ASSESSMENT FORM

Thank you for your interest in the Ross MAcc Program. Please provide the following information to have non University of Michigan courses assessed for prerequisite satisfaction. Courses may be complete, in progress or intended at the time of submission. For courses you have not completed, indicate the estimated time of completion in the “Term/Year of Completion” field. Please provide a link to your school’s public course catalog in the “Course Web Link” field to confirm course description.

For a course to meet our prerequisite requirements:
• It must be taken in a classroom setting (not online)
• You must earn a grade of “C” or better
• Intermediate-level courses must be completed at a four-year degree granting institution
• Finance courses may not be used to waive an accounting prerequisite course

STUDENT INFORMATION
First Name: ___________________________ Last Name: ___________________________
Email Address: ___________________________ Confirm Email: ___________________________
Anticipated Start Term/Year: ___________________________

PREREQUISITE COURSES

**Principles of Financial Accounting**
University: ___________________________
Course Number: ___________________________ Course Name: ___________________________
Course Credits: ___________________________ Course Grade: ___________________________
Term/Year of Completion: ___________________________
Course Web Link: ___________________________
Course Description: ___________________________

**Principles of Managerial Accounting**
University: ___________________________
Course Number: ___________________________ Course Name: ___________________________
Course Credits: ___________________________ Course Grade: ___________________________
Term/Year of Completion: ___________________________
Course Web Link: ___________________________
Course Description: ___________________________

**Intermediate Financial Accounting**
Fulfillment of this course requires Int. Fin I and Int. Fin. II, if both courses are offered at your university.
University: ___________________________
Course Number: ___________________________ Course Name: ___________________________
Course Credits: ___________________________ Course Grade: ___________________________
Term/Year of Completion: ___________________________
Course Web Link: ___________________________
Course Description: ___________________________
Microeconomics
University: 
Course Number: 
Course Credits: 
Course Grade: 
Course Web Link: 
Course Description: 

Statistics
University: 
Course Number: 
Course Credits: 
Course Grade: 
Course Web Link: 
Course Description: 

ADVISORY PREREQUISITE COURSE
Cost Accounting
If this course is not completed prior to beginning the MAcc, a graduate-level equivalent will be required for degree completion.
University: 
Course Number: 
Course Credits: 
Course Grade: 
Term/Year of Completion: 
Course Web Link: 
Course Description: 

Thank you for submitting a Ross MAcc Prerequisite Assessment Form. You will be contacted regarding your courses shortly.