



**MSc Financial Management  
CARICOM ORDER FORM**

*Please complete ALL fields.*

New Student

Continuing Student  EBS SID # \_\_\_\_\_

Title:	First Name:	Surname:
Date of Birth: (dd/mm/yyyy)		Mobile Phone:
Home Phone:		Business Phone:
E-Mail (1):		E-Mail (2):
Mailing Address:		

Tuition (Online classes) are offered for subjects in bold		
Tick to Select Subject.		
Stage 1		Stage 2
Core Courses	Elective Courses	Core Courses
<input type="checkbox"/> <b>Financial Decision Making</b>	<input type="checkbox"/> <b>Quantitative Methods</b>	<input type="checkbox"/> Derivatives
<input type="checkbox"/> <b>Financial Risk Management</b>		<input type="checkbox"/> Credit Risk Management
<input type="checkbox"/> <b>Finance</b> (old)		
<input type="checkbox"/> <b>Accounting</b> (old)		
Stage 3		
Core Course	Elective Courses Cont'd	
<input type="checkbox"/> Advanced Financial Decision Making	<input type="checkbox"/> <b>Strategic Planning</b>	
Elective Courses	<input type="checkbox"/> <b>Economics for Business</b>	
<input type="checkbox"/> <b>Corporate Governance</b>	<input type="checkbox"/> Research Methods for Business & Management	
<input type="checkbox"/> Mergers & Acquisitions	<input type="checkbox"/> Practical History of Financial Markets	

**Payment to be facilitated via wire transfer.** Refer to your “Fee and Payment” guidelines or email us at [masters@sbc.edu.tt](mailto:masters@sbc.edu.tt) for more information

**EXEMPTIONS:** I hereby agree that if I purchase a Course for which I may be granted an exemption, I will **not** receive a refund.

**DECLARATION:** By signing and submitting this form to [masters@sbc.edu.tt](mailto:masters@sbc.edu.tt) , I agree to the following: (1) To the exemption clause above (2) My information may be shared with EBS (3) My email address may be shared for Educational purposes (4) That the above information is accurate.

Sign: \_\_\_\_\_

Date: \_\_\_\_\_