Center for Financial Training Recordkeeping Services Request Form

STUDEN	Г NAME:			
LAST 4 D	IGITS OF SS#:			
EMPLOY	ER NAME:			
MAILING	ADDRESS:			
BUSINES	S PHONE:			
E-MAIL A	DDRESS:			
HOME AD	DDRESS:			
HOME/CE	ELL PHONE:			
PLEA	SE CHECK DESIRED SERVICE(S):			
()	Official Transcript (will be mailed directly to the college) (includes an unofficial copy to the student)		Fee	\$25.00
	Please send my transcript to the following school:			
	School Name: Attention: Address:			
()	Transfer Credit Evaluation		Fee	\$30.00
	I have requested that		mail my	v transcript directly to CFT
()	(college or university) Unofficial Transcript		Fee	no charge
()	Completed Diploma/Certificate Request		Fee	no charge
	(Diploma or Certificate Title)			
()	Diploma/Certificate Replacement		Fee	\$10.00
	(Diploma or Certificate Title)			
()	Webinar Credit Request - Webinar Title:		_ Fee	\$15.00
PLEA	SE SEND THE ABOVE ITEM(S) TO MY: (CIRCLE ONE)	HOME	WOR	К
SIGNATURE		DATE		

PLEASE SEND COMPLETED FORM TO: RENEE FEW - CENTER FOR FINANCIAL TRAINING Fax: 860-823-1410 e-Mail: renee@cfteducation.org

Pay by Credit Card using our secure website <u>https://cftnow.org/about-cft/online-bill-pay/</u> Fees shown are subject to change.