

Center for Financial Training Recordkeeping Services Request Form

STUDENT NAME: _____

LAST 4 DIGITS OF SS#: _____

EMPLOYER NAME: _____

MAILING ADDRESS: _____

BUSINESS PHONE: _____

E-MAIL ADDRESS: _____

CELL PHONE: _____

PLEASE CHECK DESIRED SERVICE(S):

Official Transcript (will be mailed directly to the college)
(includes an unofficial copy to the student) Fee \$30.00

Please send my transcript to the following school:

School Name: _____

Attention: _____

Address: _____

Transfer Credit Evaluation Fee \$20.00

_____ I have requested that _____ mail my 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

PLEASE SEND THE ABOVE ITEM(S) TO MY: (CIRCLE ONE) HOME WORK

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 <https://cftnow.org/about-cft/online-bill-pay/> Fees shown are subject to change.