

# Center for Financial Training Recordkeeping Services Request Form

STUDENT NAME: \_\_\_\_\_

LAST 4 DIGITS OF SS#: \_\_\_\_\_

EMPLOYER NAME: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

BUSINESS PHONE: \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_

HOME/CELL PHONE: \_\_\_\_\_

## PLEASE CHECK DESIRED SERVICE(S):

- ( ) Official Transcript (will be mailed directly to the college) Fee \$25.00  
(includes an unofficial copy to the student)

Please send my transcript to the following school:

School Name: \_\_\_\_\_

Attention: \_\_\_\_\_

Address: \_\_\_\_\_

- ( ) Transfer Credit Evaluation Fee \$30.00

\_\_\_\_\_ 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 Mail: 5474 Shunpike Rd, Lockport, NY 14094

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