

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.