



Transcript Request

DATE OF REQUEST: _____

- Charge is \$7.00 per transcript. Exact payment must accompany each request. *Fee is subject to change without notice.*
- Transcript will not be released until all accounts are paid in full.
- Student is responsible for providing accurate information.

Please select campus:

- Orlando
- Palm Harbor

NAME/ADDRESS/ENROLLMENT INFORMATION

Current Name _____ Program Attended _____
 Name While Enrolled _____ Dates of Enrollment _____ to _____
 Street Address _____
 City/State/ZIP _____ Social Security Number (last 4) _____
 Telephone () - _____ Signature _____
 Email _____ *By signing above, I authorize Central Florida Institute to release my official transcripts to the recipient(s) listed below.*

SEND TRANSCRIPT(S) TO

School/Business _____ School/Business _____
 Recipient Name _____ Recipient Name _____
 Department/Building _____ Department/Building _____
 # of Transcripts _____ Mail Fax # of Transcripts _____ Mail Fax
 Street Address _____ Street Address _____
 City/State/ZIP _____ City/State/ZIP _____
 Fax # () - _____ Fax # () - _____

NOTE: Transcripts sent directly to student/graduate will be stamped "ISSUED TO STUDENT"

METHOD OF PAYMENT

Credit Card – I hereby authorize a charge of \$_____ be made to my credit card*.
 VISA MasterCard Am Ex Discover
 Account Number _____ Expiration Date _____ 3 Digit Sec Code _____
 Name on Card _____ Signature _____ Date _____
 Billing Address (if different than above) _____

Check Or Money Order Payable to CPTC Check/Money Order Number _____

FOR OFFICE USE ONLY

of Transcripts Requested: _____ Amount Due: \$ _____ Amount Received: \$ _____
 Date Transcript(s) Sent: _____ Completed By: _____ Comments: _____
 Request Held Reason: _____

Transcript Requests will not be processed without this completed & signed Transcript Request Form

Mail Requests to:
 CFI Records
 11300 4th Street North, Suite 200
 St. Petersburg, FL 33716

*Credit Card Requests may also be faxed to (727) 342-6421 or emailed to CFIRecords@careerpathtraining.com
 Credit Card Requests will appear as a Pathfinder debit/charge on your account.

PLEASE ALLOW 10 BUSINESS DAYS FOR PROCESSING