



Date: _____ Organization (Print Clearly): _____

Contact E-mail / Fax (Print Clearly): _____

Student Name (s) (Print Clearly): _____

To Whom It May Concern:

The New York College of Podiatric Medicine has established processing fees for the activities listed below:

Verification of Education / Transcripts (must remit to verify) - \$10.00 / Per Applicant;

Duplicate Diploma fee - \$85.00 * Please note that there is a \$25 charge for expedited shipping (next-day/overnight). Expedited shipping occurs once we receive the diploma after the 3-4 week processing time it takes for us to receive the document.

Kindly remit a check or money order payable to **NYCPM** in the amount of \$10 (per provider) **along with your original request**, to cover the cost of your requested education verification.

Please mail a check or money order attention to the Registrar's Office to:

New York College of Podiatric Medicine
Attn: Registrar's Office
53 East 124th Street
New York, NY 10035

To pay by credit card **please contact the Bursar's Office at (212) 410-8039 or enter your payment information below.** We appreciate your cooperation. You can return this form via e-mail to arice@nycpm.edu or fax it to (212) 722-4918.

Sincerely,
Adrian Rice
Assistant Registrar

Payment Information:

American Express Card #: _____

Expiration Date: __/__/__ - 4 digit code _____

MasterCard/Visa Card #: _____

Expiration Date: __/__/__ - 3 digit code _____