



Request for Registrar Service

Print clearly, completing all sections that apply. You must sign & date this form. Make check or money order payable to NYCPM (See fees below). Payment can also be made over the phone using a credit card by contacting the Bursar's office at (212) 410-8039, or you may input your payment information below. You can fax the completed form to (212) 722-4918 or e-mail it to aroberts@nycpm.edu.

Name: _____ **Phone Number:** _____

Current E-mail address: _____ **Student ID# :** _____

Date of Birth: _____

Check Status: Currently Enrolled Graduate/Former Student

Services Requested: Current Letter of Good Standing - No Fee National Board Scores (current students only) - \$5.00
 Verification of Education (Grad/Former Student) - \$10.00 Clinical Evaluations - No Fee
 Dean's Letter - \$10.00 Special Handling/Overnight - \$25.00

Signature: _____ **Date:** _____

Print plainly the name, office and address of recipient in the box below. You may also input a fax number.

Fax to Address Mail to Addressee To Be Picked Up At Desk

Payment Information:

American Express Card #: _____

Expiration Date: ___/___ - 4 digit code _____

MasterCard/Visa Card #: _____

Expiration Date: ___/___ - 3 digit code _____

Official Use Only
Signature Received
Mailed On: _____
Initial: _____