

Certified Family Life Educator (CFLE) Abbreviated Application - 2015

For office use only	
Date	
Check #	
Amount \$	

National Council on Family Relations

(For students graduating from a NCFR approved academic program http://ncfr.org/cfle-certification/become-certified/cfle-degree-programs). Access this form at http://ncfr.org/cfle-certification/become-certified/cfle-degree-programs). Access this form at http://ncfr.org/cfle-certification/become-certified/cfle-degree-programs). Access this form at http://ncfr.org/cfle-certification/become-certified/abbreviated-application-process/abbreviated-application-form when you are ready to apply to ensure you have the most current information.

I. Name:		e your name to appear on your ce			
		e your name to appear on your ce		ım 30 cnaracters).	
Telephone: Work:	Но	ome:	Cell:		
E-mail:	Alternate E-mail:				
completion of the NCFR-app the school, or sent electroni NCFR's address for recipient with an unofficial transcript,	roved courses is required. cally from the school (to main information). For your conwith the option of paying y	ial transcript showing degre This transcript may be includancenbourgeois@ncfr.org.nvenience, you may apply in your application fee in two iblication fee and your application fee	ded with this a Include "Mau your final tern nstallments. A	application, mailed from reen Bourgeois" and m before graduation After graduation, send	
<u>Institution</u>	<u>Major</u>	Degree Level Awarde	ed Ye	<u>ear</u>	
website at http://ncfr.org/cf IV. Fee - Graduates should for Provisional Certification.	enclose a non-refundable a Students applying in their f rs) or \$115 (non-members)	d courses provided by univernified/cfle-course-checklists application fee of \$120 (NCF final term of enrollment can) when you send your final of emembership number.	s-school. FR Members) on pay in two ins	or \$165 (non-members) stallments: \$50 initially,	
		on membership card or maili Please pay with separate ch			
\$ Cho	eck Credit Card -> VI	SA MasterCard AMEX Di	iscover Diner	s Club JCB (Circle one)	
Credit Card #		Expiration	on date	CVD #	
Name, Street Address and Z	ip Code of card owner:				
V. CFLE Code of Ethics - Re	ad and sign the CFLE Code o	of Ethics and include with yo	our application	1.	
VI. Please print & sign below	w to verify that the informa	ation on this application is ac	ccurate to the I	best of your knowledge.	
Name		D	ate		