

Certificate and Score Release Request Form



- PLEASE PRINT CLEARLY
- FAX COMPLETED FORM TO: (866) 665-9570 toll free or (312) 583-9853 local direct
- NOTE: *Incomplete and unsigned forms will not be processed.*

YOUR NAME _____ SOCIAL SECURITY # _____

() ()
Work Telephone Home Telephone Email Address

X Signature (Required) _____

Type of exam: ServSafe® Food Safety ServSafe Alcohol® Other (please specify)

Estimated Exam Date and Location (if known)

DUPLICATE CERTIFICATE SECTION—Please allow 2-3 weeks for delivery or select RUSH DELIVERY

- BASIC DELIVERY—\$20 Charge** **RUSH DELIVERY (Receipt in 7 business Days)—\$35 Charge**
- Cash payments not accepted.
 - FMP® certification plaque replacement is \$35.
 - Fraudulent use of any Association Certificate or wallet card is subject to prosecution to the full extent of the law.
 - Certificates cannot be faxed.
 - National Restaurant Association cannot reprint expired certificates*.

Name Change Needed? Yes No Print Correct Name Here: _____

Mailing Address/Suite # _____

City State Zip Code

If being sent to an organization, please include the name of the organization here.

*ServSafe Food Safety Certificates older than 5 years are expired. *ServSafe Alcohol Certificates older than 3 years are expired.

PAYMENT INFORMATION—REQUIRED FOR DUPLICATE CERTIFICATE ORDERS ONLY

If billing to an account, you must provide that number on this form. The cost covers the processing of your request, materials, and shipping. Make checks payable to National Restaurant Association (Association).

Check/Money Order/Account Number: _____ Amount \$ _____

or if paying by credit card: Visa AMEX MasterCard Diners Club Discover

Name on Card Card Number Security Code Expiration Date

SCORE RELEASE SECTION—Please allow 5 business days minimum for processing—FREE OF CHARGE

I, the signee, give permission to the Association to release my Exam score information.

Please fax score information to: _____ at this fax number: () _____

Association Internal Use ONLY

- The Association does not have an Exam score on file for this individual.
- The Association confirms it has a record of the following course(s) on file for this individual. (See below)

Course _____ Exam Date _____ Percent Score _____

Instructor _____ Course Sponsor _____

National Restaurant Association, 175 W. Jackson Blvd, Suite 1500, Chicago, IL 60604