NEW YORK STATE | Fire Prevention and Control

State Office Campus • Building 7A, 2nd Floor
1220 Washington Avenue • Albany, NY 12226
Phone: (518) 474-6746
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Multiple Student Training Record Transcript Request

We authorize and give our permission to the NYS Office of Fire Prevention and Control to release a transcript of our training records to:

_____

Print name of person or organization

_____

Print Address

Printed Name of Student	Signature of Student	Training ID Number

Note: Transcript request must be submitted in writing. Request may be mailed or faxed to OFPC.

If you wish to have your transcript faxed, you must provide a fax #_____