



Fox Valley School of Massage

P.O. Box 615 * Neenah, WI 54957-0615

Phone 920-915-0744

www.FVSM.org

Revised: 8/10/2020

WI State Form #2962 Education Verification

This form must be completed by the FVSM Alumni

This form is not accepted if completed by another institution to protect privacy and confidentiality.

To request that your education at FVSM be verified for with the state of WI please follow the steps below:

1. The person requesting their education be verified **must call FVSM** before sending this form to inform FVSM of submission so that we can begin the process.
2. The individual must have applied to the state of WI before contacting FVSM. FVSM cannot, by the WI application process, verify education until AFTER a candidate applies.
3. The form must be mailed to: **FVSM**

P.O. Box 615

Neenah WI 54957-0615

WI Education Verification fee: \$50.00 with payment – cash or cashier’s check only .

4. Be sure to keep a copy of the completed form for your records.
5. Upon FVSM receiving this form, you will be contacted by text and the request will be completed.

Complete the following

I am requesting my education at FVSM be verified with the state of WI.

Name: _____

Name while attending FVSM: _____

Year Graduated: _____ Social Security Number: _____

Phone Number you can be reached at to complete processing of request: _____

Current Address: _____

Current Email: _____

Current Cell Phone Number: _____

Payment: \$50.00

Payment can be Cash or Cashier’s Check (no personal checks or credit cards)

Print Name: _____

Date: _____

Signature: _____