

Appendix D: Matrix of Current Counselors
 (Application for Approval as a Nonprofit Budget Counseling Agency)

Name of Agency: Other business names used at this location, if any: Street address:										
Total number of personnel at this location: _____	Counselor Names									
	1.	2.	3.	4.	5.	6.	7.	8.	9.	10. <small>(Copy this page for additional employees)</small>
Supervisor (check)										
EDUCATION - Highest Degree Received (check one)										
High School										
A.D.										
B.A./B.S.										
M.S.										
J.D.										
Other *										
COUNSELOR CERTIFICATION (check all that apply)										
Accredited or Certified by Independent Organization*										
Course of Study*										
CFP										
AFC										
CPA										
EXPERIENCE (state years of experience)										
Credit Counseling										
Personal Financial Management										
Consumer Credit Education										
Financial Planning										
Marketing & Sales										
Other										
BACKGROUND (state the year of criminal check and check if no criminal conviction for felony, fraud, dishonesty, or false statements)										
Criminal Check										
No Criminal Conviction										

* Disclose on separate page. See Section 5 of Instructions for appropriate disclosures.