

**Appendix D: Matrix of Current Instructors**

<b>Name of Provider:</b> <b>Other business names used at this location, if any:</b> <b>Street address:</b>										
<b>Total number of personnel at this location:</b>  _____	<b>Instructor Names</b>									
	<b>1.</b>	<b>2.</b>	<b>3.</b>	<b>4.</b>	<b>5.</b>	<b>6.</b>	<b>7.</b>	<b>8.</b>	<b>9.</b>	<b>10.</b> <small>(Copy this page for additional employees)</small>
<b>Supervisor (check)</b>										
<b>EDUCATION - Highest Degree Received (check one)</b>										
High School										
A.D.										
B.A./B.S.										
Graduate (M.S., J.D., Ph.D.)										
Other (specify)*										
<b>INSTRUCTOR CERTIFICATION (check all that apply)</b>										
Certified as a Credit or Financial Counselor*										
Course of Study*										
CFP										
RFC										
CPA										
<b>EXPERIENCE (state years of experience)</b>										
Credit Counseling										
Financial Management - Financial Planning										
Consumer Credit Education										
Consumer Economics										
Other (specify)*										
<b>ANNUAL CONTINUING EDUCATION</b>										
State year of most recent completion of continuing education course.										

\* Disclose on separate page. See Section 7, Appendix D, of Instructions for additional detail.