



Experience Verification Form (EVF)

A. Candidate Instructions

You will need to submit your experience hours via your myAFCPE Dashboard. The EVF must be attached as a supporting document when submitting.

The Experience Verification Form is required for submissions in the following categories:

- Counseling & Coaching
- Teach Financial Education Classes/Workshops
- Supervising Financial Counselors or Programs
- AFC Supervised Experience

For additional information on experience hours, please see the [AFC Experience Guide](#).

Best Practices for a Successful Submission

- Candidates may not self-verify their experience. The EVF must be signed by a qualified, independent third-party verifier not related to the candidate.
- If your experience is from self-employment or pro bono work, you will need an EVF completed by a professional with related experience who is familiar with your work and can attest to your experience. You can think of this person as a professional reference.
- Candidates may only submit experience from the 10 years preceding their program deadline. EVFs with an experience start date outside the eligible window will not be accepted. *
- Candidates are encouraged to consolidate experience hours by category when possible. For example, a candidate provides 85 hours of financial counseling every month. They can submit a single EVF at the end of the year when they have reached the 1,000-hour requirement.
- For full functionality of the EVF, including e-signature, please open it in [Adobe Acrobat Reader](#) and not a web browser.
- The EVF can be signed electronically or with a handwritten signature.
- You will receive an email confirmation and alert on your myAFCPE Dashboard once your experience submission is processed. Submissions take up to 5 business days to review.

For a brief tutorial on the Experience Verification Form, [view this short video](#).

For questions, please reach us at certification@afcpe.org or 614-368-1055.

**FINRA Foundation Fellows' experience assignment and timeline may differ.*

B. Verifier Instructions

Who is Eligible to Verify Experience Hours?

- The verification must be completed by a qualified, independent third party not related to the candidate. Candidates may not verify their own hours.
- There are two types of verifiers for AFC experience:
 1. An individual who works at the same company where the experience was obtained and is authorized to verify experience. This could be a current or former supervisor, HR representative, volunteer coordinator, or other qualified individual.
 2. If the candidate's experience is from self-employment or pro bono work, a qualified professional with related experience can attest to the experience. This could be a peer, mentor, professional reference, or other qualified mentor.

What is Eligible for Experience Hours?

- All experience must relate to the [AFC Core Competencies](#) and personal finance.
- Candidates may only submit experience from the 10 years preceding their program deadline.
- Verifiers must acknowledge that the [AFCPE Standards of Practice](#) and [Code of Ethics](#) have been upheld, to the best of their knowledge, during the accumulation of the experience.

Instructions for Completing the Form

- After the candidate completes Section A, fill out Section B and sign either electronically or with a handwritten signature. For full functionality of the EVF, including e-signature, please open it in [Adobe Acrobat Reader](#) and not a web browser.

FAQs

1. How often should the candidate meet with the person that is supervising them?

It is recommended that regular meetings are held to ensure that the candidate is progressing appropriately and that any issues or questions can be addressed promptly.

2. What is involved in completing an EVF?

As a supervisor, you will need to attest that the candidate has obtained relevant experience during the specified timeframe and that you are authorized to provide the information and verification included on the form.

For questions, please reach out to certification@afcpe.org or call 614-368-1055.

AFCPE® Experience Verification Form

For full functionality of document and signature fields, please open in Adobe Reader and not your web browser.

All fields must be complete for your form to be accepted.

SECTION A – TO BE COMPLETED BY CANDIDATE

Candidate Name: _____

Experience Start Date: _____ Experience End Date: _____

How many experience hours are you reporting on this form? (1-1000): _____

I grant permission to the Verifier in Section B to release to AFCPE the information requested on this form for the purposes of verifying my employment and/or experience. I attest that all information provided on this form is accurate and truthful and I acknowledge that failure to submit complete or accurate information may result in disciplinary action including the suspension or revocation of AFC® certification.

Candidate Signature

Date

SECTION B – TO BE COMPLETED BY VERIFIER

Verifiers must acknowledge that the [AFCPE Standards of Practice](#) and [Code of Ethics](#) have been upheld, to the best of their knowledge, during the accumulation of the experience. All experience must relate to the [AFC Core Competencies](#).

Verifier Requirements:

The verification must be completed by a qualified, independent third-party not related to the candidate (candidates may not verify their own hours).

- Verifiers must be authorized by the company or organization listed in Section B to verify employment or experience.
- OR-
- Verifiers must have appropriate professional experience related to personal finance, financial counseling, financial education, financial planning, or related field.

Verifier Name: _____ Job Title: _____

Company/Organization Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Relationship to Candidate: _____

I attest that the candidate identified in Section A has obtained relevant experience during the timeframe specified. I further attest that I am authorized by the company/organization listed above to provide the information and verification included on this form OR otherwise meet the Verifier Requirements.

Verifier Signature

Date