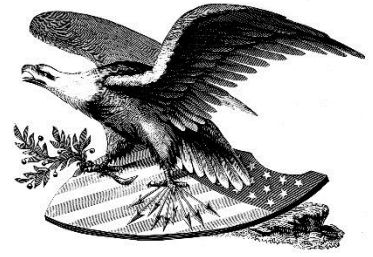


Request for Credentials | Advisor

SaratogaSHARP®



SECTION I: ADVISOR INFORMATION

Advisor Name

Firm

Advisor Phone Number

Fax Number

Email

Advisor Address

City

State

Zip

SECTION II: SARATOGASHARP® DATA (FOR USE BY SARATOGA EMPLOYEES)

Advisor Approved By

Date Approved