



ASCISS Credential Evaluation

We Specialize in Foreign Credential Evaluation & Information Services

Credential Evaluation Application

Last (family) Name First Name Middle Name

Previous used names U.S. Social Security Number

Mailing Address (number, street, city, state, zip code & country)

Work Phone Evening Phone Fax

E-Mail Place of Birth Date of Birth (Mo/Day/Yr)

Sex Citizenship Country of education received

Major and Degree received Date of degree received (Mo/Day/Yr)

Number of Years in Degree Program

Purpose of Evaluation

- | | |
|--------------------------------------|---|
| <input type="checkbox"/> Education | Field of Study & Desired Institution: _____ |
| <input type="checkbox"/> Immigration | Visa/Position: _____ |
| <input type="checkbox"/> Employment | Field: _____ |
| <input type="checkbox"/> Licensing | Field: _____ |
| <input type="checkbox"/> Teaching | Degree: _____ |
| <input type="checkbox"/> Other | Specify: _____ |

Types of Evaluation Requested: (Check the type of service and fill in the amount)

- | | | |
|--|---------------|-------|
| <input type="checkbox"/> General (Document by document) | \$60: | _____ |
| <input type="checkbox"/> Course by Course | \$110 | _____ |
| <input type="checkbox"/> Licenses | \$220 | _____ |
| <input type="checkbox"/> Teacher Certification | \$220 | _____ |
| <input type="checkbox"/> Course Analysis and Catalog Match | \$20/course | _____ |
| <input type="checkbox"/> Translation (Chinese only) | \$50/document | _____ |



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Types of Service Requested: (Check the type of service and fill in the amount)

<input type="checkbox"/> Same Day Service	\$150	
<input type="checkbox"/> 2-day Service	\$100	
<input type="checkbox"/> 3-day Service	\$80	
<input type="checkbox"/> 5-day Service	\$50	
<input type="checkbox"/> Overnight Delivery Service within US or Canada	\$25	
<input type="checkbox"/> Overnight Delivery Service outside US or Canada	\$50	
<input type="checkbox"/> Certified Mail Service	\$20	
<input type="checkbox"/> Additional Report	\$10/report	

Evaluation Report Mailing Instructions:

- Please mail both copies of the evaluation report to the address above.
- Please mail one copy of the evaluation report to the address above and another copy to:

- _____ Additional copies requested at \$10/copy. Please provide mailing addresses.

Payment: (payment must be made in U.S. dollars)

- Money Order * Make checks / money orders **payable to** ASCISS.
- Check

Please provide the following documentations:

- The completed application form with your signature.
- Copies of all official educational records in the original language and their English translation.
- Chronicle list of your education and work experience with dates of attendance/employment.
- Others: Specify _____

Affirmations:

- I certify that the information submitted on behalf of the evaluation is true and correct.
- I certify that I have read the instructions and conditions and agree to the terms stated herein.
- I understand that evaluation reports prepared by American Service Center for International Students and Scholars, Inc. are advisory in nature and are not binding upon any agency or institution.
- I release American Service Center for International Students and Scholars, Inc. from any liability for damages resulting from the use of an evaluation report by me or any other third party.

Signature _____ **Printed Name** _____ **Today's Date** (Mo/Day/Yr) _____

(Signature is required to start the process)
* **Make your check payable to: ASCISS**