



Application for Evaluation of Foreign Educational Credentials

Address: 11206 A Osage Circle
Westminster, Colorado, 80234, USA

Telephone: 303. 585.0978

E-mail: info@foreignconsultants.com

Website: www.foreignconsultants.com

**Please provide all the information requested below.
Use a typewriter or neatly print your responses using a pen.**

1. Name Print or type your full name. Put only 1 letter in each box.	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="border-bottom: 1px solid black; height: 20px; width: 50%;"></td> <td style="border-bottom: 1px solid black; height: 20px; width: 50%;"></td> </tr> <tr> <td style="text-align: center; font-size: small;">Last (Family) Name</td> <td style="text-align: center; font-size: small;">First Name</td> </tr> <tr> <td colspan="2" style="border-bottom: 1px solid black; height: 20px;"></td> </tr> <tr> <td colspan="2" style="text-align: center; font-size: small;">Middle Name</td> </tr> </table>			Last (Family) Name	First Name			Middle Name																							
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Middle Name																															
2. Other Names List alternate names appearing on your documents, if applicable.	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="border-bottom: 1px solid black; height: 20px;"></td> </tr> <tr> <td style="text-align: center; font-size: small;">All Other Names used</td> </tr> </table>		All Other Names used																												
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3. Mailing Address Phone Fax E-mail Include your direct (immediate) contact information.	<table style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="3" style="border-bottom: 1px solid black; height: 20px;"></td> </tr> <tr> <td colspan="3" style="text-align: center; font-size: small;">Street Address</td> </tr> <tr> <td style="border-bottom: 1px solid black; height: 20px;"></td> <td style="border-bottom: 1px solid black; height: 20px;"></td> <td style="border-bottom: 1px solid black; height: 20px;"></td> </tr> <tr> <td style="text-align: center; font-size: small;">City</td> <td style="text-align: center; font-size: small;">Postal Zip Code</td> <td style="text-align: center; font-size: small;">State/Province</td> </tr> <tr> <td colspan="3" style="border-bottom: 1px solid black; height: 20px;"></td> </tr> <tr> <td colspan="3" style="text-align: center; font-size: small;">Country</td> </tr> <tr> <td colspan="2" style="border-bottom: 1px solid black; height: 20px;"></td> <td style="border-bottom: 1px solid black; height: 20px;"></td> </tr> <tr> <td style="text-align: center; font-size: small;">Telephone Number</td> <td colspan="2" style="text-align: center; font-size: small;">Cellular Number</td> </tr> <tr> <td colspan="3" style="border-bottom: 1px solid black; height: 20px;"></td> </tr> <tr> <td colspan="3" style="text-align: center; font-size: small;">E-mail Address (example: name@internet.com)</td> </tr> </table>				Street Address						City	Postal Zip Code	State/Province				Country						Telephone Number	Cellular Number					E-mail Address (example: name@internet.com)		
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Telephone Number	Cellular Number																														
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4. Have you used FCI services before?	<input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, state FCI Reference Number: <div style="text-align: center; font-size: x-small;">(page 1 of your evaluation report)</div>																														
5. Birth Date (month, day, year)	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">Month </td> <td style="width: 33%;">Day </td> <td style="width: 33%;">Year </td> </tr> </table> <div style="float: right; text-align: right;"> 6. Sex <input type="checkbox"/> Female <input type="checkbox"/> Male </div>	Month 	Day 	Year 																											
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6. Purpose of Evaluation Check or write down the purpose of your evaluation	<div style="font-size: small;"> <input type="checkbox"/> Undergraduate (1st year) <input type="checkbox"/> Undergraduate (transfer) <input type="checkbox"/> Graduate <input type="checkbox"/> Employment <input type="checkbox"/> Military <input type="checkbox"/> Immigration <input type="checkbox"/> Other <input type="checkbox"/> Professional Licensing/Certification: State: Profession: </div>																														



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7. Evaluation Products and Services Check the type of evaluation needed.	<input type="checkbox"/> Comparability Evaluation (without Courses, Grades, GPA)..... \$100 <input type="checkbox"/> Course-by-Course Evaluation of High School Education..... \$160 <input type="checkbox"/> Course-by-Course Evaluation of One degree (earned in the same school) \$180 <input type="checkbox"/> Course-by-Course Evaluation of Every Other Degree \$100 <input type="checkbox"/> Every additional School per Degree \$30* <i>*if a Degree was earned in more than one School add \$30 per School</i> <input type="checkbox"/> Evaluation of Education and Work Experience for USCIS..... \$500 <input type="checkbox"/> Insertion into Evaluation each Certificate without Transcript..... \$45 <input type="checkbox"/> Catalog match (per subject)..... \$30 <input type="checkbox"/> Comparable Program Research..... \$250 <input type="checkbox"/> Prescreening of educational documents with consultation..... \$50* <i>*Payment will be accounted with the order</i>				
8. Certified Translation Services	Amount of pages to Translate from any Language into English and from English into any Language	Price per 1 page \$60	Total Translation Price		
9. Extra set of the original Evaluation Report	<input type="checkbox"/> If ordered with the Initial Application..... \$30 <input type="checkbox"/> If ordered within 1 year after completion of the Initial Evaluation Report (First copy) \$55 <input type="checkbox"/> If ordered over 1 year after completion of the Initial Evaluation Report (First copy) \$120 <input type="checkbox"/> Each consecutive copy of the same Evaluation Report \$25				
10. Extra set of the original Certified and Notarized Translation	<input type="checkbox"/> If ordered with the initial Application..... \$30per page <input type="checkbox"/> If ordered within 1 year after completion of the initial Translation (First copy) \$15per page <input type="checkbox"/> If ordered over 1 year after completion of the initial Translation (First copy)..... \$30per page				
11. Rush Services	<input type="checkbox"/> Next day Rush Service \$160 <input type="checkbox"/> 2-3 days Rush Service..... \$130 <input type="checkbox"/> 5-day Rush Service..... \$75				
12. Express Shipment	<input type="checkbox"/> Priority Mail with tracking number within USA/Canada (2-3 business days)..... \$30 <input type="checkbox"/> Express overnight shipment within USA/Canada..... \$40 <input type="checkbox"/> USPS Express Mail International (3-5 business days)..... \$40 <input type="checkbox"/> FedEx International (1-3 business days)..... \$100				
13. Total Charges	Total Charges per Order: _____ \$				
14. Educational Institutions List All Educational Institutions Attended starting from: High School or Institution of Higher Education Consult our Specialists which Educational documents you need to evaluate to achieve your goal	Name(s) of School(s) Attended	City & Country	Diploma/Certificate Earned (if any)	Month/Year Started	Month/Year Completed



Required Documents

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(see Detailed requirements).

5. All other Evaluation Reports require both copies of the Diplomas and/or Certificates and their Official Academic Transcripts or Equivalent.

Payment Options

1. No refund will be issued once Application has been submitted
2. No personal checks are accepted
3. Payments are limited to:
 - ◆ Cashier Checks *
 - ◆ Money Orders * (Print the Name of the applicant on the Money – Order)
 - ◆ All Credit Cards are excepted (Visa, Master Card, Discover, American Express)

* Please, print the Name of the Applicant on the Check or Money Order

Processing

Processing time is ten working days from receipt of all required documents and fees.

More time may be required if special research is necessary.

1. One Copy of each Evaluation report is included in the basic fee.
2. One Copy of Certified and Notarized Translations is provided
3. No refunds will be issued once an application has been submitted.

Affirmations

1. I hereby certify that the information provided on this Application, and in the documents included with it, is true, accurate, and correct to the best of my knowledge.
2. I understand that this evaluation is advisory in nature and that Foreign Consultants, Inc. assumes no responsibility or liability for consequential damages when the desired equivalency cannot be recommended.
3. I agree to reimburse Foreign Consultants, Inc. for any and all costs, including legal expenses, which it may incur as a result of any claim that I or anyone having an interest in my earnings or services may make based on the evaluation determination which foreign Consultants, Inc. makes relaying on the application.
4. I hereby certify that I have read and understand the instructions and conditions provided with this form and that I agree to the Terms stated therein.
5. I understand that if false, forged, altered or falsified documents are submitted to FCI, Inc., no evaluation report will be prepared, no refund will be made, the designees for copies of the report will be notified, and the information will be shared with academic institutions, government agencies, professional organizations and other evaluation services.

You must sign and date this application in order for it to be processed.

Signature of Applicant (Do Not Print) _____ **Date:** _____
Sign Entire Name (Month/Day/Year)

Please E-mail or Mail this Application and all the enclosures to:
Foreign Consultants, Inc. 11206 A Osage Circle
Westminster, Colorado, 80234 USA
Email: info@foreignconsultants.com
Phone: 303-5850978