



Please PRINT:

1. NAME (for evaluation report): _____
 Given/First Name Middle Name Last/Family Name

2. Mailing Address: _____

3. Phone: Cell/Mobile: _____ Home: _____ Work: _____

4. email address: _____

5. Check here if you want the evaluation report to be sent to an address different than your mailing address (e.g. CPA Board):

6. Have you submitted an application to us before: No Yes, if Yes, date: _____ File # _____

7. How did you hear about us?

- Friend/Relative Name of Individual _____
- College/University Name of Individual, College/University _____
- Web website/search engine: _____
- Licensing Board Name of Individual//Board: _____
- Other Information _____

8. Services Needed

<u>Primary Services</u>	<u>Extra Copy/Mailing</u>	<u>Rush Services</u>	<u>Translation Services</u>
A <input type="checkbox"/> \$ _____	G <input type="checkbox"/> \$ _____	M <input type="checkbox"/> \$ _____	T <input type="checkbox"/> \$ _____
B <input type="checkbox"/> \$ _____	H <input type="checkbox"/> \$ _____	N <input type="checkbox"/> \$ _____	U <input type="checkbox"/> \$ _____
C <input type="checkbox"/> \$ _____	I <input type="checkbox"/> \$ _____	O <input type="checkbox"/> \$ _____	V <input type="checkbox"/> \$ _____
D <input type="checkbox"/> \$ _____	J <input type="checkbox"/> \$ _____	P <input type="checkbox"/> \$ _____	
E <input type="checkbox"/> \$ _____	<u>Additional: Profession Services</u>		<u>Revision/Cancellation</u>
	R <input type="checkbox"/> \$ _____		X <input type="checkbox"/> \$ _____
	S <input type="checkbox"/> \$ _____		Y <input type="checkbox"/> \$ _____

TOTAL: \$ _____

9. Payment: VISA debit MasterCard debit Check / Money Order

To pay by debit card please fill in this information:

Debit Card #:	Expiration date:
Name on Debit card:	Signature of cardholder: (required)
Debit card billing address: (If different than mailing address above)	

For Official use only: (Do not enter anything here)

File # _____ - _____ - _____ Date Received: ____ / ____ / ____ Verifier/Evaluator: _____

Amount Received: _____ Mode of Payment: _____

ACREVS Inc.

Academic & Credential Records Evaluation & Verification Service
1798 Clear Lake Ave. Milpitas, CA 95035-7014
Phone: 408 719 0015; www.acrevs.com

10. NAME (for evaluation report): _____
Given/First Name Middle Name Last/Family Name

11. OTHER NAME (that appear on educational records; Maiden name) _____
Given/First Name Middle Name Last/Family Name

12. You are: Male Female 13. Date of birth: _____ Birth: _____
(Month/Day/Year City Country)

14. Social Security Number (for Professional Evaluation) _____

15. Purpose of Evaluation:

Admission to an Educational Institute: Name, City, State (if known) _____

Employment: Name of Individual/Company (if known) _____

Immigration; What Type of VISA are you applying for?: _____

Professional License: Teaching Credential; Accountancy; Barber/Cosmo; Other: _____

_____ In what State are you applying for this Professional License?

Other _____

16. List all educational institutions you have attended or are attending, including secondary school. Include the name of each certificate/diploma as it appears on your document(s). Use separate sheet if necessary - **PLEASE FILL IT OUT CAREFULLY**

Level of Education	Name of Institution	City/Country	Date Entered Mo/Yr.	Date Departed Mo/Yr.	Exact Name of Diploma/ Degree Awarded + Date English & Original language	Length of Program in years

1. I hereby certify that the information provided on this application is true, accurate and correct. 2. I understand that the information provided by ACREVS Inc. on this application and/or its website is subject to change at any time. 3. I acknowledge that the evaluation report, based on ACREVS Inc. research, may differ from my own interpretation or that provided by another party. 4. I understand that the evaluation reports prepared by ACREVS Inc. is advisory in nature and are not binding upon any agency, institution or organization, which may or may not use them. I also understand that ACREVS Inc. assumes no liability for consequential damages when the desired equivalency cannot be recommended. 5. I release ACREVS Inc. from any liability for damages to or loss of any documents submitted. 6. I release ACREVS Inc. from any liability for damages resulting from the use of an evaluation report by any third party or me. 7. I agree to reimburse ACREVS Inc. for any and all costs, including legal expenses, which may incur as a result of any claim that I (or anyone having any interest in my earnings or services) may make, based on the recommended equivalency. 8. I certify that I have read the instructions, and "Terms and Conditions" and that I understand and agree to the terms stated therein. 9. I hereby authorize the release of this evaluation to the party/parties listed in this application form. I understand that if false information or forged, altered, or falsified documents are submitted to ACREVS Inc. at any time, 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.

This application creates a contract between ACREVS Inc. and the person who has signed the application. If the signer is not the person whose educational credentials are being submitted for evaluation, the act of signing certifies that the signer is acting on behalf of the person whose educational credentials are involved, and has the authority to do so.

Signature of Applicant _____ Date: _____

Final Checklist

Please ensure the following accompany the completed application form:

- Academic records - ORIGINALS
- Translations (if applicable)
- Photocopies of all original documents submitted (including translations), made on regular size paper (8.5" x 11")
- Payment: check, cashier's check, money order or debit card

Terms and Conditions

1. **Advisory** – The evaluation reports prepared by ACREVS Inc. are advisory in nature and in no way limit an agency or institution in making its own determination as to the level of education and allocation of credit to be allowed for the foreign credentials. ACREVS Inc. is not liable for consequential damages if the desired equivalency is not recommended.
2. **Agency Criteria** – Any questions concerning specific requirements and procedures for licensure, employment, or admissions criteria should be addressed by the applicant to the appropriate licensing board, agency or institution.
3. **Altered or Irregular Documents** – If forged, altered, or falsified documents are submitted to ACREVS Inc., the request for evaluation will be immediately cancelled. All documents (original and photocopies) become the property of ACREVS Inc.. No refund will be issued. The information will be made available to the appropriate persons (academic institutions, government agencies, professional organizations and other evaluation services).
4. **Applicable Law** – In the event of any disputes between the applicant and ACREVS Inc., such disputes shall be governed by California law and shall be subject to the jurisdiction of the Santa Clara County courts.
5. **Correspondence** – Changes to an application must be submitted in writing. Once the evaluation is completed, applicants have 30 days from the date of issue of the evaluation report within which to raise any questions concerning its content. Thereafter, the file will be closed and no discussion/updates/changes will be entertained.. Mail the updates and/or questions to ACREVS Inc's customer service department at the office address.
7. **Damaged or Lost Documents** – Original documents submitted by the applicant are returned by a secure mailing service. While every effort is made by ACREVS Inc. to ensure the proper handling of educational documents, ACREVS Inc. accepts no liability related to the loss or damage of documents.
8. **Limited Liability of Service** – While every effort will be made to complete the evaluation in approximately 6 weeks (may be longer), ACREVS Inc. cannot guarantee processing times and assumes no liability related to the delay of an evaluation report. ACREVS Inc. shall not be responsible for any incidental or consequential damages that an applicant may incur if the educational equivalency anticipated by the applicant is not issued. ACREVS Inc. shall not be liable for any damages resulting from the use of the evaluation report.
9. **Reassessment of Equivalencies** – ACREVS Inc. bases its evaluation analysis on the best information available to professionals in applied comparative education in the United States at the time when the evaluation is made. When additional information becomes available, ACREVS Inc. reserves the right to reassess educational equivalencies. When copies of an evaluation report are requested at a later time, ACREVS Inc. has no obligation to review or revise the report in accordance with any changes that may have occurred.
10. **Re-Evaluation Request** – Evaluations based on documents not submitted with the original request are considered to be new evaluations, and a second payment of the standard fee is required. The amount paid for any previous evaluation report is not credited against the charge for a re-evaluation.
11. **Refunds** – No refunds will be issued once an application has been submitted, even if the applicant disagrees with the evaluation.
12. **Verification** – ACREVS Inc. reserves the right to contact educational and governmental institutions/agencies for additional information and/or verification of the authenticity of the credentials submitted, including, but not limited to, sending copies of credentials to the institution.
13. **Extra Copy** - ACREVS reserves the right not to issue extra copy of the evaluation report
14. **Note** – ACREVS Inc. reserves the right to refuse service to anyone.

<u>PRIMARY SERVICES</u>	<u>EXTRA COPY/MAILING</u>
<u>Service Code A</u> \$ 155 <i>General Evaluation:</i> provides an evaluation of foreign academic credential to determine the highest educational equivalent (of the degree(s)), within the U.S. educational system Each Additional Credential \$ 45	<u>Service Code G</u> \$ 45 Extra Copy at the time of initial evaluation
<u>Service Code B</u> \$ 95 Add-on Service to <i>General Evaluation</i> : <i>Course-by-Course (Detail) Evaluation:</i> Evaluation of tertiary education courses. Includes conversion of foreign grading scale and credit system into the U.S. 4.0 Grading scale. (up to 40 courses) (second Service "B" for additional courses/subjects) Each Additional Credential \$ 95	<u>Service Code H</u> \$ 55 Extra Copy ordered after initial evaluation
<u>Service Code C (per credential)</u> \$ 35 Add on to <i>Service Code B</i> : This service provides a U.S. grade point average (GPA) on a 4.0 scale	<u>Service Code I</u> \$ 25 Mailing: Return of documents/evaluation or mailing to 3 rd party/board/institution
<u>Service Code D</u> \$ 35 Application fee (for all applicants)	<u>Service Code J (estimate only)</u> \$ 75 Mailing documents outside of U.S.
<u>Service Code E</u> \$ 145 General Evaluation of High School only	
<u>TRANSLATION SERVICES</u>	
	<u>Service Code T</u> \$ 35 Translation of supporting documents (e.g. Diploma, degree Certificate, etc). This translation is used internally for evaluation purposes only
	<u>Service Code U</u> \$ 110 Translation of transcripts/ mark sheets (1 fee for every 40 subjects/courses). This translation is used internally for evaluation purposes only
	<u>Service Code V</u> \$ 50 Verification of a translation done outside the U.S. only applicable in certain cases
<u>RUSH SERVICES</u>	
When ordering RUSH service, ALL fees (regular + Rush fees must be paid by money order or cashier's check (does not include day submitted & delivered)	
<u>Service Code M</u> \$ 245 1 Day Rush service (confirm availability)	
<u>Service Code N</u> \$ 145 2 Days Rush service (confirm availability)	
<u>Service Code O</u> \$ 95 5 Day Rush service	
<u>Service Code P</u> \$ 55 10 Day Rush service	
<u>REVISION/CANCELLATION</u>	
	<u>Service Code X</u> \$ 90 Minor Revision of a prior evaluation (e.g. name change, purpose of evaluation) Major Revision: \$ 90 + Additional Services required
	<u>Service Code Y</u> \$ 150 Minimum cancellation fee. If the evaluation process has already begun then the fee will increase, up to the entire fee amount
NOTE: If Fraudulent documents are submitted then the Evaluation will NOT be done and no portion of the fees will be refunded	
<u>ADDITIONAL: PROFESSION SERVICES</u>	
<u>Service Code R</u> \$ 65 Incomplete or Non-traditional credential (e.g. non-B.A., M.A., PhD); or credential where subject names not listed in line with grades/units	
<u>Service Code S</u> \$ 65 Additional Fee for Professional License Purpose OR training/internships/etc. as part of curriculum	

Mailing Address:**ACREVS Inc.
1798 Clear Lake Ave.
Milpitas, CA 95035-7014****Phone: 408 719 0015
email: info@acrevs.com**