



CENTER FOR APPLIED RESEARCH, EVALUATION AND EDUCATION, INC. INTERNATIONAL EVALUATION SERVICE (IES /CAREE)

P.O. Box 18358, Anaheim, California 92817-8358
Tel.: (714) 237-9272 or -9276 Fax: (714)237-9279
Email Address: eval_caree@yahoo.com
Website: www.iescaree.com

OFFICE USE ONLY	
Date:	
Ref. #	

APPLICATION FOR EVALUATION OF INTERNATIONAL CREDENTIALS

A. PERSONAL DATA: (Please print to ensure legibility)

- Name: _____
Last/Family _____ First _____ Middle _____
Name on educational records: _____
Last/Family _____ First _____ Middle _____
- Mailing Address: _____
Number & Street _____ City _____ State _____ Zip Code _____ Country _____
- Telephone: Day _____ Evening _____ Male Female
- Date of Birth: _____ Country of Birth: _____
Month /Day /Year
- U.S. Social Security #: _____ Country(ies) where you were educated: _____
- Have you applied to this Center before? Yes No If Yes Date: _____ Ref # _____
- How did you learn about CAREE/IES? _____ Email Address: _____

B. PURPOSE OF EVALUATION:

- Education (Degree Objective: _____)
- Employment Immigration
- Professional Licensing/Certificate
- Other (Specify: _____)

C. TYPE OF REPORT NEEDED: (see Parts F & G on page 2)

- General Report Comprehensive Report
- Course-by-course Report GPA
- Rush Service (Additional fee)
 5 business days 2 business days

D. EDUCATIONAL INSTITUTIONS ATTENDED (Required):

All educational institutions attended must be listed. Begin with the year started primary (elementary) school. End with the year and name of last institution attended (including current schools, if any). Write name of the awarded Certificate / Diploma as stated on your documents. Use additional paper if needed.

Month & Year attended		Name of School / College / University	Year of Graduation	Name of Certificate, Diploma, or Degree
From	To	[Year started Primary school: _____]	----	
		Secondary School:		

E. COMPLETE NAME & ADDRESS OF AGENCY / INSTITUTION for which the evaluation is intended. (PLEASE PRINT)

If you have an intended institution, do provide the full name and address so they can be printed on Eval. Report., which then can be mailed directly to institution by regular mail if you check the box below, no extra charge. If faster or secure mailing to institution is wanted, refer to item 4 on Fee Schedule for additional postage fee. If you leave this area blank, Eval. Report will not be addressed to any institution, sealed, and mailed to you, with its copy, and all submitted original documents. State the deadline, if any.

Mail directly to Institution.

NOTE: The evaluation reports prepared by CAREE/IES are advisory and are not binding upon any institution, agency, or organization which may use them.

By signing this Form, I represent and warrant that I have carefully read, fully understand and agree with all terms, conditions, & requirements specified on back side of this Form, and related paperwork provided to me in connection with this Application.

Date: _____ Signature: _____

EVALUATION WILL NOT BE PROCESSED WITHOUT A VALID SIGNATURE

CHARTER MEMBER, NATIONAL ASSOCIATION OF CREDENTIAL EVALUATION SERVICES, INC. (NACES)

F. TYPE OF EVALUATION REPORTS:

- 1. General report:** A concise statement, indicating in chronological order the institutions attended, credentials (certificate, diploma, degree) awarded and recommendations for their U.S. range of equivalencies. (Mostly for Employment/Immigration.)
- 2. Course-by-course Report:** Presented in a transcript format, listing all subjects studied in corresponding academic year(s), with U.S. equivalency of grade and credits for each subject. Subjects considered to be at Lower division level will be indicated.
- 3. Comprehensive Report:** consists of both General and Course-by-Course Report. Mostly for Professional Lic./Grad. Admission.
- 4. Evaluation by Reconstruction:** Reconstruction form is needed when Course-by-course report is requested for transcript of records that do not show credits/units or hours of instruction for the subjects listed.

G. CHECKLIST of required documents and information. Must be submitted with the Application:

(An unsigned Application or incomplete data will delay the evaluation process)

- a)** A money order or certified check for appropriate fee. [Eval. fee is non-refundable for any reason except stipulating in Part H.3.(4)]
- b)** All original credentials (Transcript/Diploma), Certified Translations if are not English, and a set of photocopies of original documents.
- c)** Fully completed and signed Application Form, especially Part D for educational background.
- d)** You must read the IES/CAREE terms and conditions carefully before signing and submitting the Application form.

H. TERM AND CONDITIONS: [Do NOT submit this Application unless you agree to the Center's Terms and Conditions]

- 1. Limited Liability of Service:** IES/CAREE shall have no liability to an applicant for the performance or nonperformance of an evaluation **or** for loss of or damage to documents submitted with respect to an application. It is not liable for any incidental or consequential damages if the equivalency anticipated by the applicants is not recommended. In short, IES/CAREE shall not be liable for any damages result from the use of an evaluation report.
- 2. "Rush" service will start ONLY when complete documents/information have been received.** Furthermore, IES/CAREE assumes no liability related to the lateness of an evaluation report, other than the refund of the "RUSH" fee if the evaluation report cannot be prepared within the stated time, upon receipt of all the requested materials.
- 3.** All evaluation reports/forms, and copies of documents are properties of IES/CAREE. IES/CAREE reserves the right to seek legal redress and consequential damages if the Evaluation Report is used for any other purpose other than stated on Part B, page 1.
- 4. Understanding and Agreement:**
 - (1)** I understand that the Center makes no guarantees or warranties (expressed or implied) to process the application and complete the evaluation in the way I anticipate. I agree to indemnify the Center and hold it harmless: **a).** for any damage resulting from acts undertaken and/or omissions allowed by the Center in any connection with this application, **b).** from any liability if the equivalency anticipated by me is not recommended, **c).** for any damages resulting from the use of the Evaluation. I agree to reimburse IES/CAREE for all costs, including legal expenses which it may incur as a result of any claim that I (or anyone having interest in my earnings of services) may make, based on the evaluation report and recommendations.
 - (2)** I authorize IES/CAREE to disclose any and all information reasonably required to be released in connection with the processing of this application, whether or not the evaluation is ultimately completed to my satisfaction. I acknowledge that, if any documents submitted with respect to an application appears or is determined by IES/CAREE to be irregular or altered, the request for the evaluation will be immediately cancelled, the fee will not be refunded and said documents will not be returned. The Institutions/agencies to which the evaluation was to be sent will be notified as well as members of the National Association Credential Evaluation Services (NACES), and if necessary, the appropriate government agencies.
 - (3)** I agree that the fee charged by IES/CAREE to process this application is payable in advance, and that **it is not refundable** (in whole or part), unless there is excess fee. I understand that if I cancel a routine eval. request within three (3) business days of receipt in the Center, I will be charged the processing fee and postage/handling fee, and if the cancellation was for a Rush request, the Rush fee is not refundable at any time.
 - (4)** I understand that any returned check will be charged an extra \$25 penalty fee, and to be resubmitted in Money Order only.
 - (5)** I also understand that if I agree to have the evaluation completed as requested or explained to me, IES/CAREE has the right to collect the fee in full, even though the evaluation report has not yet been delivered due to unpaid fee balance.
 - (6)** I understand that, when there is no response received from the applicant, IES/CAREE reserves the right to cancel any evaluation, with no refund, or charge an extra fee, if the requested information/doc. , or fee balance, is not received within two months of the Center's request date, or within the time limits indicate in the correspondence with the applicant.
 - (7)** I release IES/CAREE from any liability for loss or damage to document submitted with my Application, that is not from a willful act of negligent, and beyond IES/CAREE control, i.e. courier service.
 - (8)** I understand that IES/CAREE reserves the right to refuse service to any one, and may reject this application, for any reason whatsoever, at any time whatsoever.
 - (9)** I certify that the information set forth on this application, and on any detailed analysis or the other paperwork relating to this application, is true, accurate and correct.

