

AERC

American Education Research Corporation

Education – Research – Development

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- Foreign Credentials Evaluation
 General Equivalency Report
 Detailed Equivalency Report

Documents Translation
 Number of documents to be translated:

Other (please specify)

Please check and complete all questions. Blank answers may delay processing. Type or print clearly.

1. Applicant's Name:

Last Name

First Name

Middle Name

2. Sex M F

3. Name as it appears on documents if different from above

Last Name

First Name

Middle Name

4. Current mailing address

Street Address

Apt #

City

State / Country

Zip Code

5. Home phone

6. Work/Cell phone:

7. E-mail address:

8. Date of birth (month / day / year):

9. Place of birth:

State / Country

10. Years of education completed. Begin from first grade (circle one)

Less 8 9 10 11 12 13 14 15 16 17 18 More

11. List all educational institutions in chronological order, including elementary and secondary. Must be completed by all applicants requesting evaluation. Add additional sheets if necessary.

Name of Institution	City/Country	Dates Attended From/To	Name of Certificate / Degree / Diploma Earned	Graduation Date	Major

12. Language of foreign records presented:

13. Country of records:

14. Purpose for which evaluation is intended:

15. Intended major in the US:

16. Name and address of institutions requesting evaluation(s):

17. Do you want a copy to be mailed directly to the above listed institution(s)? Yes No

18. How did you learn of our services?

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IMPORTANT

- 1. The undersigned has read, understood, and agrees to all terms and conditions specified in the applicant information section, and releases AERC from any liability for damages resulting from the use of this form. AERC is not responsible for documents lost, stolen, or damaged.
- 2. The undersigned authorizes the above listed educational institutions to release information to AERC.
- 3. The undersigned certifies under penalty of perjury that the information provided in this application and the records presented are true and correct to the best of his/her knowledge. Alteration or irregularities in records presented will result in such documents to be impounded or the information disseminated to the appropriate authorities.

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Signature

Date

REQUEST: (Additional Fee)

- Rush evaluation
- Additional copy(ies) _____
- Documents returned by Registered Mail
- Documents returned by Certified Mail
- Documents returned by Overnight Courier (US)
- Lower and upper division specification

FOR OFFICE USE ONLY	
D.R.	EVAL
D.M.	P.C.
F.L.	R.

ENCLOSED:

- Credentials (original or official documents only)
- Payment (Amount) \$ _____