

**For Office Use Only:**

<input type="checkbox"/> Evaluation with Translation	<input type="checkbox"/> General Evaluation
<input type="checkbox"/> Evaluation only	<input type="checkbox"/> Grade Evaluation
<input type="checkbox"/> Translation only	<input type="checkbox"/> Comprehensive Evaluation
	<input type="checkbox"/> Comprehensive for Boards

Client ID: 20 -

UPDATE APPLICATION

Use this form if you have previously had an evaluation completed by Academic Evaluation Services and are adding new documents for evaluation or requesting a more detailed evaluation of previously submitted documents.

Forms may be emailed (preferred), faxed or mailed to our office along with original or official documents to be evaluated. Refer to contact information at the end of this form or on our website.

PERSONAL DATA:

Name (on evaluation): _____

(Family name / Last name)

(Given name / First name)

(Middle name/s)

Date of Original Evaluation: (month) _____ (day) _____ (year) _____

CURRENT ADDRESS:

Address: _____

City: _____ State: _____ ZIP: _____ E-mail: _____

Home phone: _____ Mobile phone: _____ Work phone: _____

UPDATE REQUESTED FOR (Purpose):

<input type="checkbox"/> Study in the U.S.	<input type="checkbox"/> Teaching (teacher / substitute / aide / assistant)
<input type="checkbox"/> Employment	<input type="checkbox"/> Professional licensing (specify field: _____)
<input type="checkbox"/> Immigration matters	<input type="checkbox"/> Military service <input type="checkbox"/> Other

NEW DOCUMENTS SUBMITTED – new documents will be added to the previous evaluation**For Secondary / High School Level Education:** (CXC, "O"-Levels, BAC, etc.)

Name of School: _____

City _____ Country _____ Language in which document was issued: _____

Dates of Attendance: _____ Date of Conclusion: _____

Name of Certificate / Diploma Received: _____

Date of Certificate / Diploma: (month in words) _____ (day) _____ (year) _____ not completed _____

For University Level Studies: (Associate, Bachelor's, Master's, Doctoral degrees, professional titles or equivalent)

Institution 1: _____

City _____ Country _____ Language in which document was issued: _____

Dates of Attendance: _____ Date of Conclusion: _____

Certificate/Diploma / Degree Received: _____

Date of Certificate / Diploma: (month in words) _____ (day) _____ (year) _____ not completed _____

Institution 2: _____

City _____ Country _____ Language in which document was issued: _____

Dates of Attendance: _____ Date of Conclusion: _____

Certificate/Diploma / Degree Received: _____

Date of Certificate / Diploma: (month in words) _____ (day) _____ (year) _____ not completed _____

NEW SERVICES REQUESTED:*Payment for full-service fee is required for updated evaluations.***NO REFUNDS EXCEPT IN CASES OF OVERPAYMENT**

_____ General Evaluation (\$100.00)
 _____ Grade Evaluation (only for secondary level documents) (\$155.00)
 _____ Comprehensive Evaluation (\$225.00)
 _____ Comprehensive Evaluation for Professional Boards (\$300.00)
 _____ Translation - Number of pages to be translated: _____ (\$50 per page)
 * Refer to translation requirements: <http://www.acs-edu.org/website/home/services.cfm#translation>
 _____ **RUSH Services (3 to 5 business days): additional 100% of all fees selected above**
 _____ Extra sealed copy (\$25.00 per copy)
 _____ Verification (\$50.00 per institution) This service is required for all academic documents from Haiti, for all university documents from Nigeria and may be required from any country, if the institution for which the evaluation is requested requires this service or if the evaluator determines it is necessary; one fee per institution.

DELIVERY OF COMPLETED EVALUATION

Client's will receive an "eCopy" sent electronically to the client's email on file. These copies are not official and cannot be printed or edited. **Each evaluation fee also includes ONE OFFICIAL COPY that may be mailed to the client or institution, OR an electronic copy to be emailed to the institution only. A separate delivery fee is required for depending on the option selected.**

SELECT ONE OPTION BELOW.☐ **Mail official paper copy to CLIENT at address indicated above**

_____ US\$35.00 Domestic Overnight Courier (in the US only) via FedEx (P.O. Boxes & APO will be shipped via USPS)
 _____ US\$55.00 International Courier via FedEx (3 to 5 business days): for all other countries - Country: _____

☐ **Mail paper copy to INSTITUTION at address indicated below**

_____ US\$35.00 Domestic Overnight Courier (in the US only) via FedEx (P.O. Boxes & APO will be shipped via USPS)

Institution Name: _____

Address: _____

City: _____ State: _____ ZIP: _____

☐ **Email electronic copy to INSTITUTION at email address indicated below**

Please ensure your institution will accept electronic evaluations via email and provide a valid institution email address. **This copy will not be sent to the client under any circumstances.** If you require an official copy to yourself, you must select the paper copy option.

_____ US \$15.00 E-file copy - Email the electronic institution/official copy directly to an institution. _____

EXTRA COPIES \$25.00 per copy + delivery fee for each address provided☐ **Mail paper copy to CLIENT at address indicated above**

_____ US\$35.00 Domestic Overnight Courier (in the US only) via FedEx (P.O. Boxes & APO will be shipped via USPS)
 _____ US\$55.00 International Courier via FedEx (3 to 5 business days): for all other countries - Country: _____

☐ **Mail extra paper copy to INSTITUTION at address indicated below (requires a separate mailing fee for each address provided)**

_____ US\$35.00 Domestic Overnight Courier (in the US only) via FedEx (P.O. Boxes & APO will be shipped via USPS)

Institution Name: _____

Address: _____

City: _____ State: _____ ZIP: _____

☐ **Email extra electronic copy to INSTITUTION at email address indicated below**

Please ensure your institution will accept electronic evaluations via email and provide a valid institution email address. **This copy will not be sent to the client under any circumstances.** If you require an official copy to yourself, you must select the paper copy option.

_____ US \$15.00 E-file copy - Email the electronic institution/official copy directly to an institution. _____

Service Fees: US\$ _____

Delivery Fees: US\$ _____

TOTAL FEES of US\$ _____

NO REFUNDS EXCEPT IN CASES OF OVERPAYMENT OR SERVICES DECLINED BY THIS OFFICE

Payment Method:

☐ *AES to email me secure payment link after receiving this application & any new documents* (for clients from 2012 to present) **OR**

☐ *enclosed check/money order* Payable to Academic Evaluation Services, Inc. (No services will be provided until fees paid by personal check are cleared by the bank. There will be a \$30.00 additional fee for any check returned for insufficient funds.)

☐ *For clients from 2011 and prior ONLY*, meaning you do **NOT** have an online account; you may submit payment securely via PayPal at the following link. <https://www.paypal.me/aestampa>

TERMS OF SERVICE:

We ask that if you do not agree with any of these terms, please do not submit an application for services. The terms are as follows:

General

- It is the obligation of the client to confirm with the receiving institution or organization that they accept our evaluations as well as the type of evaluation required.
- It is the obligation of the client to thoroughly read all information at www.aes-edu.org to understand the evaluation process and requirements before submitting an application.

Payment

-All fees paid are non-refundable except in case of overpayment.

- An application fee of \$50 is non-refundable in case this office declines to provide services to the client.
- No services will be provided until all required documents have been received and all required fees have been paid.

Time Frame

- The standard time for completion of services is approximately two to three weeks once all documents have been received and all fees have been paid.
- RUSH services are completed between three to five business days once all documents have been received and all fees have been paid.
- If your file requires verification services, the time frame is dependent on the response time of the verifying institution and no time frame can be estimated by AES. This applies to standard and rush timeframe files.
- Any missing documents must be submitted within a four-week period; this office must be notified if additional time is needed. After three months of no reply, your evaluation may be cancelled.

Fraudulent Documents

- This office reserves the right to investigate and verify any document under suspicion of fraud, alteration or inaccuracies.
- Any documents questioned by this office regarding its authenticity will not be returned to the client under any circumstances.
- This office has the professional obligation to notify NACES members and take legal action in the case of suspected/confirmed/fraudulent/alterd/inaccurate documents submitted.

PERMISSION TO SHARE INFORMATION:

Acceptance of services by the individual named on this application authorizes this office to release or obtain information related to documents submitted; only institutions pertinent to said documents are included in this clause.

The individual named on this application grants permission to _____ to make inquiries and/or represent him/her as needed in relation to the services requested from this office.

Applicant's signature: _____ **Date:** _____

Mailing Address:
ACADEMIC EVALUATION SERVICES, INC.
8875 Hidden River Parkway, Suite 110, Tampa, FL 33637
Contact Info:
Phone: 813-374-2020 Fax: 813-374-2023
info@aes-edu.org