



Ashland Educational Services, Inc.

www.AshlandEducationalServices.com

Email: Info@AshlandEducationalServices.com

Instructions to complete the Application Agreement Form (AAF 1000)

- Step I Read the “Policies, Procedures on authenticity, Conditions and Disclaimer” section of the end of the Application Agreement Form. (AAF) Page #2.
- Step II Complete and sign the Application Agreement Form (AAF)
- Step III Enclose your academic support documents in original language with Certified English Translations.
- Step IV Pay online or by bank deposit the full amount (non-refundable after three days).
- Step V Mail the packet to our office. Visit our website for the latest information.

Personal Information:

Last Name (Family) _____
 First Name: _____ Middle/ Maiden name: _____
 Gender: _____ Date of Birth: ____ / ____ / ____
 Mailing Address: _____

 Apt No. ____ City: _____ State/Province: _____ Zip Code: _____
 Country: _____
 Home Phone: _____ Wireless No.: _____
 Email address: _____

Applicant Academic History:

Name of the institution: _____
Location of the institution: Town / City: _____
Institution website: _____
Province/State/District: _____
Region/Country: _____ **Country:** _____
Name of the program completed: _____
Length of the program: _____
Major / Field of study: _____
Language(s) of instruction: _____
Textbooks language (s): _____
Years of study: _____
Degree earned: _____
Number of Semesters / Quarters: _____
Graduation date / Completion program date: _____

Purpose of Evaluation:

Circle one: (a) Employment (b) Education (c) Professional Board (e) Other

Comments:

Ashland Credentials Report follows authenticity procedures stated in our website and our agency procedure manual. We use research tools to verify the documents.

Conditions and Disclaimer:

1. **Refund policy:** The client has the right to cancel within three working days for a full refund.
2. **The destination entity** has the final decision on the evaluation credentials report of the applicant. **An entity might be a college, university, Board or employer.**
3. **Fees:** Total cost is: \$169.00. Additional official copies have a cost of \$35 per set.
4. **Penalty:** In the event, of an ACH or stop payment and/or cancel payment, a fee of \$78 plus a collection charge will be added to the account. **We have the right to report you to a collection agency or an attorney for collection and credit bureaus.**
5. We reserve the right to request an institutional’s catalog with course description of the attended **program study.**
6. **Authenticity:** a client needs to submit original documents from the college or university to be able to process the application. We will verify the authenticity of your documents.
7. The client needs to abide to the **code of ethics stated** in our website.
8. The foreign credential are advisory documents and are not binding upon any agency, institution, licensing board organization, which may use them. Limited acceptance.
9. I release AES from any and all liability whatsoever resulting from the use of a credential evaluations advisory report by me or third party.
10. All support documents transcripts, diplomas, records should be in the native language of the institution awarding the degree and only then all the submitted documents must be translated by authorized authority as an ATA translator.
11. We report any fraudulent documents to the State Board of Education and Boards of Nursing
12. The Ashland Credential Report is final. It cannot be disputed.
13. **Evaluators, CIO, Advisory Board Members and/or A.E.S. staff** follow ICAE, NAFSA.org. AACRAO.org, and EIAL.org procedures and mandates. Visit our website for the latest information on policies, ethics code standards, authenticity procedures, and disclaimers.

I certified that the information provided in this application agreement form and all support materials are true and correct. I have read the instructions, policies, authenticity procedures, code of ethics in this application and/or our web site and accept the policies, procedures and disclaimer stated herein. The signature below authorizes Ashland Educational Services to search academic and /or clinical information of your attended institution(s) and/or government agency (ies) to support the Ashland Credentials Report.

Applicant’s signature. _____

Date: _____

Instructions:

Mail Certified /Returned Receipt all your original documents with the Certified English translator to:

Ashland Educational Services Mailing Address: 917 West Washington Blvd.

Suite 126. Chicago, Illinois, 60607

Electronic mail: Info@AshlandEducationalServices.com

Web site: <http://www.AshlandEducationalServices.com>