



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 1000) 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/Providence: _____ 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 Boards (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 submitted documents. Plan ahead, the process might take up to four months when all-parties involved verified the

Conditions and Disclaimer:

1. If we determine that your academic institution records misrepresent your education or are in anyway fraudulent (including records from a Diploma Mill School), **no evaluation** will be prepared, no refund will be made, and evaluation agencies and nursing boards will be notified.
2. **Refund policy:** The client has the right to cancel within three working days for a full refund after signed the Ashland Application AAF-1000.
3. **Nursing Evaluation Fees:** Online Payment through “Zelle Application”. <https://www.zellepay.com/>
4. We reserve the right to request an institution’s catalog with course description of the attended **program study**.
5. **Authenticity:** a client needs to submit original documents from the high school, college or university to be able to process the application. We will verify the authenticity of your documents.
6. The client needs to abide to the **code of ethics stated** in our website.
7. The foreign credential are advisory documents and are not binding upon any agency, institution, licensing board organization, which may use them. Limited acceptance.
8. I release AES from all liability whatsoever resulting from the use of a credential evaluations advisory report by third party or myself.
9. All support documents transcripts, diplomas; records should be in the native language of the institution awarding the degree and only then authorized authority, as an ATA translator must translate all the submitted documents.
10. The Ashland Credential Report is final. **It cannot be disputed.**
11. **Nursing Evaluators, CIO, Advisory Board Members and/or AES 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.
12. **Status of Application:** the applicant may reach us at the following email: **info@AshlandEducationalServices.com**

Satisfaction with Evaluations – Ashland Educational Services (AES) follows the Placement Recommendations of The National Council on the Evaluation of Foreign Educational Credentials. AES guarantees that highly qualified evaluators prepare all evaluations, but it cannot guarantee that the applicant will concur with the outcome of the evaluation. Any questions or concerns or complain about evaluations must be submitted in writing by email to:

Evaluators:@AshlandEducationalServices.com

Services and Fees

1. Nursing Course-by-Course Credentials Evaluation – \$340.00 on-line payment by Zelle Online Application. All thy documents need to be in order and all verification must be received. Ten (10) business days after all the documents are received
2. The cost for each additional State Board of Nursing is \$325.00.
 - 24-Hour Evaluation - \$149.00 in addition to the basic fee of \$340.00
 - Two-Day Evaluation - \$99.00 in addition to the basic fee of \$340.00
 - Five Business (5) -Day Evaluation Report - U.S. \$49.00 in addition to the basic fee of \$340.00
 Additional fee may be requested to cover research and courier Services

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/online Acknowledgement: _____

Date: _____/_____/_____

Mailing Instructions:

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

Ashland Educational Services Mailing Address:

917 West Washington Blvd. Box 126. Chicago, Illinois, 60607

Electronic mail: info@AshlandEducationalServices.com

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