

PO Box 170116 Boston, MA 02117 Tel. 617.338.7171 Fax. 617.338.7101 www.cedevaluations.com

1	. P	PERSON	NAL INFORM	ATIC	NC													
Family / Last First Name											Middle Initial	Other names that appear on records						
	g Address No. and Na	me							Apt	. No.								
City State										ZIP / Postal Code		Country						
Email Phone										U.S. Social Security Se:						Sex M	F	
Date of Birth Country of your										Number (if any) Has CED prepared an NO YES If YES, when was the								
(MM/DD/YYYY) Credentials											for you before?		la	ast one	done?(Yea	ar)		
2	. F	EES AI	ND SERVICES	S	Please e Make fe	enclose appropria es payable to: C	ate fee enter f	es with to for Educ	the applicatio cational Docu	on. Ime	Fees are non-refu entation (or CED)	ndable.						
BASIC SERVICES When ordering more than one type of basic service, the highest fee will apply. When ordering more than one type of basic service, the highest fee will apply. ADDITIONAL SERVICES With evaluations previously done by CEI															/ CED			
Please choose below the type(s) of evaluation needed in part A, AND indicate the									Retyping (\$25) Additional Document (\$							ment (\$50)		
	purpose(s) of the evaluation in part B. For CPA only part A is needed. Regular service is 12 business days.								Change to CPA Evaluation (\$125) Additional Reports (\$10 ea							rts (\$10 ea	ch)	
IF ORDERING A RUSH SERVICE, TOTAL FEE MUST BE MONEY ORDER ONLY									SPECIAL SERVICES Fees additional to Basic Service Please CALL BEFORE requesting 1-2 day service									
		General Evaluation (\$80)							Rush Service (1-2 working days) (\$150) (TOTAL payment by Money Order only)									
Α	Course-by-Course Evaluation (\$130)					Rush Se				erv	vice (5-7 working days) (\$50) (TOTAL payment by Money Order or							
	CPA Examination & Licensure (\$175) Freshman Admission Visa						Interpret					ation (Portuguese and Spanish) (\$50) - Not for CPA evaluations						
В												cuments)						
D							IVI/ (ILII VC					Mail up to 16 ounces (Only within USA) (\$10)						
	Ac	Additional reports, if ordered at the same time (\$10 each)							Registered Mail (US \$15) Registered Mail (Internal							l (Internatio	nnal \$25)	
	The state of the s														στιαι ψεσή			
3. MAILING INSTRUCTIONS The original of the evaluation will be sent to the person/institution indicated below. A copy will be sent to you. If more reports are requested, please include names and addresses on the back of this form.																		
Name of contact Institution person/Department										Phone								
Address												State ZIP / Postal Code						
4. CREDENTIALS The following is a list of credentials that may be submitted for the evaluation as they apply to your particular purpose:																		
a) All of your diplomas, degrees, titles and certificates; b) Transcripts or annual course and grade listings for all years of college-level study; c) Program outlines or course description ONLY as needed (please contact CED before submitting outlines or descriptions); d) Official documents showing the stamps or the seal of the institution you attended should be submitted. Original documents may be requested; e) Word by word, line by line official translations of all records not in English must accompany the above records.																		
5. EDUCATIONAL CHRONOLOGY List all institutions attended, starting with secondary school and provide dates. If there are gaps in attendance or if certa records are unavailable, please explain of back of the application.																		
Year of Entry Institution					Graduation				e of Diploma, Degree in English Driginal Language			If an applicant submits forged, altered or falsified documents, no evaluation report will						
1.											be prepared and no refund will be made. All documents will be retained by CED and other							
2.													s will be r					
3.										I understand that this evaluation is advisory in nature and is not binding on any agency or institution that uses it. I will not hold the Cen-								
4.									ter for Educational Documentation or any of its employees responsible for any disagreements									
5.									arising from the same. I have read all the inforr CED and I accept the te						nformation			
6.											Signature and Date							
7.											6.							