

**World Academic Research Center, Inc.**

Credentials Evaluation and Translation Services

20283 State Road 7, Suite 300

Boca Raton, FL 33498

Tel: (561) 807-6330~ Fax: (561) 807-6331

E-mail: [translations@foreigndegrees.com](mailto:translations@foreigndegrees.com)

Web: <http://www.foreigndegrees.com>

**APPLICATION FOR TRANSLATION SERVICE**

**CLIENT INFORMATION**

Male  Female

01. Last Name:		02. First and Middle Name:	
03. Telephone:		04. Fax:	
05. Email:		05. Cell Phone:	
06. Mailing Address:			
Language(s) of Document(s): _____ Translate into: _____			

**COST OF *TRANSLATION* SERVICES: Spanish, French & Italian**

\$50.00 <input type="checkbox"/>	ONE-PAGE (250 words) document – 5 business days
\$70.00 <input type="checkbox"/>	ONE-PAGE (250 words) document – 24-hour

**COST OF *TRANSLATION* SERVICES: Latin, Dutch, German & Turkish**

\$70.00 <input type="checkbox"/>	ONE-PAGE (250 words) document – 5 business days
\$100.00 <input type="checkbox"/>	ONE-PAGE (250 words) document – 24-hour

**COST OF *TRANSLATION* SERVICES: Chinese, Hindi & Arabic**

\$90.00 <input type="checkbox"/>	ONE-PAGE (250 words) document – 5 business days
\$130.00 <input type="checkbox"/>	ONE-PAGE (250 words) document – 24-hour

**OTHER SERVICES**

\$10.00 <input type="checkbox"/>	Notary Service
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\$30.00 <input type="checkbox"/> <i>per copy</i>	Quantity: _____
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<b>DOCUMENTS REQUIRED FOR TRANSLATION</b>
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1	Completed and signed application form
2	Appropriate payment via PAYPAL or please mail the check or money order payable to World Academic Research Center, Inc. 20283 State Road 7, Suite 300 ~ Boca Raton, FL 33498
3	Clear, legible copies of originals of all documents needed for translation via fax or mail

<b>TERMS AND CONDITIONS</b>
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1	We are accepting credit cards via PAYPAL. In addition, payments for services must be made via check or money order in U.S. dollars payable to WARC
2	No refunds will be issued once an application has been submitted for the services of evaluations and/or translations
3	Any legal dispute that may arise between WARC and the applicant shall be governed by Florida law and be subjected to the jurisdiction of the Palm Beach County court system

I hereby certify that all the information provided on this application is true, factual and correct. I have read the instructions and the conditions and agree to the terms stated therein.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date

<b>I AGREE TO THESE TERMS</b>
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# Credit Card Authorization

Please fax or email the completed form to: World Academic Research Center, Inc.

Fax: (561) 807-6331 or Email: info@foreigndegrees.com

World Academic Research Center, Inc. has initiated this process to protect both WARC and its customers against credit card fraud. Please complete the entire form below.

We Accept: Visa, Master Card, Discover and American Express, Debit, Credit

Appropriate payment via credit card: \_\_\_\_\_ Authorized Amount: \_\_\_\_\_

Name (as it appears on credit card) \_\_\_\_\_

Credit Card Number (all digits):

Expiration Date   -

Card ID     (Last 3 or 4 digits in the back of card)

Visa  Master Card  Discover  American Express  Debit  Credit

Credit Card Billing Address:

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

\_\_\_\_\_  
Signature of Cardholder

I, hereby authorize World Academic Research Center, Inc. (WARC) to charge the above Credit/Debit Card for services and/or shipping costs made by me or my company. I understand, if any problem occurs and a new Credit/Debit Card is needed, I will immediately sign a new authorization form with the new card information.

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date