

**World Academic Research Center, Inc.**

Credentials Evaluation and Translation Services

1825 NW Corporate Boulevard, Suite 110

Boca Raton, FL 33431

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

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

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

**APPLICATION FOR FOREIGN EDUCATION EQUIVALENCY AND  
PROFESSIONAL WORK EXPERIENCE EQUIVALENCY**

**CLIENT INFORMATION**                      Male      Female      DEGREE SOUGHT: \_\_\_\_\_

01. Last Name:		02. First and Middle Name:	
03. Name as it appears on the academic documents:			
04. Country of Birth:		05. Country/Countries of Study:	
06. Contact Person		07. Federal Tax I.D or Bar Number:	
<i>Authorized Name</i>		<i>Authorized Signature</i>	
08. Mailing Address:			
09. Email Address:			
10. Phone:		11. Fax:	
Referral:	How did you find out about WARC?		

**CREDENTIAL EVALUATION OF FOREIGN DEGREE**

\$60.00	DEGREE Equivalency – 10-business day service (STANDARD)
\$90.00	DEGREE Equivalency – 5-business day service (RUSH)
\$130.00	DEGREE Equivalency– 48-hour service (RUSH)
\$180.00	DEGREE Equivalency – 24-hour service (RUSH)
\$220.00	DEGREE Equivalency – Same-day service (RUSH)

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<b>PROFESSIONAL WORK EXPERIENCE EVALUATION</b>	
\$250.00	Professional Work Experience Evaluation– 10-business day service (STANDARD)
\$280.00	Professional Work Experience Evaluation– 5-business day service (RUSH)
\$320.00	Professional Work Experience Evaluation – 48-hour service (RUSH)
\$400.00	Professional Work Experience Evaluation – 24-hour service (RUSH)
\$500.00	Professional Work Experience Evaluation – Same-day service (RUSH)
<b>POSITION EVALUATION (SPECIALTY OCCUPATION)</b>	
\$300.00	Position Evaluation (specialty occupation) – 10-business day service (STANDARD)
\$350.00	Position Evaluation (specialty occupation) – 5-business day service (RUSH)
\$400.00	Position Evaluation (specialty occupation) – 48-hour service (RUSH)
\$500.00	Position Evaluation (specialty occupation) – 24-hour service (RUSH)
\$600.00	Position Evaluation (specialty occupation) – Same-day service (RUSH)
<b>EXTRAORDINARY ABILITY EVALUATION</b>	
\$300.00	Extraordinary Ability Evaluation – 10-business day service (STANDARD)
\$350.00	Extraordinary Ability Evaluation – 5-business day service ((RUSH)
\$400.00	Extraordinary Ability Evaluation – 48-hour service (RUSH)
\$500.00	Extraordinary Ability Evaluation – 24-hour service (RUSH)
\$600.00	Extraordinary Ability Evaluation – Same-day service (RUSH)

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<b>COURSE BY COURSE EVALUATION</b>	
\$120.00	Course by Course Evaluation – 10-business day service (STANDARD)
\$170.00	Course by Course Evaluation – 5-business day service (RUSH)
\$230.00	Course by Course Evaluation – 24-hour service (RUSH)
\$270.00	Course by Course Evaluation – Same-day service (RUSH)
\$370.00	Course by Course Evaluation – Same-day service (RUSH)
<b>MAILING OPTION</b>	
	Fax and Regular mail
	Other (USPS, FEDEX, UPS, etc.) (Please, specify: _____) Please send a pre-paid envelope, your account information or add \$40.00 for overnight fee.

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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](mailto: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**

**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