



# Dallas ISD AC Program Applicant

## APPLICATION FOR CREDENTIALS EVALUATION

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### 1. GENERAL INFORMATION

**PRINT** your full legal name, without abbreviation

First name	Middle or other name	Family name
Print other family name that might appear on documents		Email address
<b>Address 1:</b> Three official copies will be mailed to this address.  Transcript Clerk DISD AC Program 2909 North Buckner, 4th Floor Dallas, TX 75228		Phone number(s)
		Fax number
<b>Address 2:</b> You are entitled to receive one official copy of the evaluation report at no extra cost. Enter the name and address where the copy is to be sent in this box. Additional copies may be purchased for \$25 each (see below).		Birth date (MM/DD/YY)
		Gender <input type="checkbox"/> Male <input type="checkbox"/> Female
		Country of origin

### 2. SERVICES AND FEES

**BASE FEES** A non-refundable processing fee of \$25 is included in the base fee. Unless a rush service is selected (see below), evaluations will be completed and mailed approximately 1 week from the date that all required documents and payments have been received by FCSA.

**Detailed Evaluation of Coursework** ..... \$110 (US) .....  
 Includes the General Statement of Equivalency and provides a detailed course-by-course listing which can be used to award transfer credit for universities, professional licensing agencies, teacher certification, etc.

#### OPTIONAL FEES

**One Day Service - Detailed Evaluation** ..... \$210 (US) .. above base fee ..  
 One day evaluations are completed within 24 hours AFTER the receipt of the FCSA application, fees, and ALL necessary educational documents, translations, etc. The evaluation will be sent by regular first-class mail unless overnight delivery is requested and paid for.

**Rush Service (3 working days after receipt of ALL materials)** ..... \$75 (US) .. above base fee ..  
 Rush evaluations are completed in 3 working days AFTER the receipt of the FCSA application, fees, and ALL necessary educational documents, translations, etc. The evaluation will be sent by regular first-class mail unless overnight delivery is requested and paid for.

**U.S. Overnight Delivery** ..... \$25 (US) .. per address ..

**Foreign Overnight Delivery (subject to carrier restrictions)** ..... \$35 (US) .. per address ..

**Additional copies (FCSA basic service includes three copies of your evaluation)** ..... \$25 (US) .. per add'l copy ..  
 Copies of your evaluation are available for two years after the exact original date of your evaluation. If you need the additional copies mailed to more than one location, write the address(es) in Section 8 of this application.

**Revisions (changing or adding to your original evaluation)** ..... \$50 (US) .....  
 Revisions can be done for two years after the exact original date of your evaluation. Send a photocopy of your evaluation along with photocopies of additional documents to be evaluated. If two years or more have passed since the date of your original evaluation, you will need to start a new evaluation.

Base fee plus optional fee = **TOTAL** .....

**Important note:** FCSA will keep your completed evaluation on file in our office for exactly two (2) years from the completion date at the top of your evaluation. During this two year period, you may request revisions to your evaluation according to the terms above, and the availability of additional copies of your report is guaranteed. Once this date has elapsed, however, you must request a new evaluation at the full price (and resubmit your documents) in order to have any further revisions made. Also, after the expiration of the two year period, FCSA can no longer guarantee that additional copies of your report will be available for purchase.

**Answers to most of your questions can be found on our website: [www.fcsa.biz](http://www.fcsa.biz).**

**3. SUMMARY OF EDUCATIONAL EXPERIENCE**

Beginning with the 10th year of formal education, complete the following educational ladder:  
 (Include any school you are presently attending. Use additional sheet if necessary.)

Name of school and location	Years of attendance		Degree, title, or certificate	Year earned or expected
	month/year	month/year		
_____	_____	to _____	_____	_____
_____	_____	to _____	_____	_____
_____	_____	to _____	_____	_____
_____	_____	to _____	_____	_____

**4. PAYMENT**

Please enter amount from TOTAL line at the end of section 2: \_\_\_\_\_

**From WITHIN the United States:**  
 I am enclosing my check drawn on a US bank, money order, or cashier's check made payable to FCSA.

**From OUTSIDE the United States:**  
 I am enclosing my international money order or check drawn on a US bank made payable to FCSA.

**From either within or outside the United States:**  
 Please bill my credit card:  VISA  MasterCard  American Express

Name on card: \_\_\_\_\_  
 Credit card #: \_\_\_\_\_ Exp. date: \_\_\_\_/\_\_\_\_/\_\_\_\_

**5. REFERRAL INFORMATION**

Please tell us who referred you and the purpose of your evaluation. Check as many from the list at right that apply.

\_\_\_\_\_

Name of referring party \_\_\_\_\_

Employment/H1 Visa  
 University admission: University \_\_\_\_\_  
 Teacher certification: State \_\_\_\_\_  
 Board or agency: Name \_\_\_\_\_  
 Immigration  
 Other \_\_\_\_\_

**6. WHAT TO SUBMIT**

**1. REQUIRED DOCUMENTS, STANDARD APPLICATION** FCSA requires that most clients submit LEGIBLE PHOTOCOPIES of all original educational documents: final degrees, diplomas, and certificates plus full transcripts/marksheets/academic records showing all subjects studied, examinations, and grades. A standard FCSA requires the following:

- Legible photocopies of ALL necessary academic documents.
- Certified English language translations, if necessary. Spanish may be self-translated.
- Appropriate payment.
- Signature at the bottom of this form.

**2. TRANSLATIONS** Certified word-for-word English translations must accompany all foreign language documents. If your document is in Spanish, you or a friend or family member may translate it and it does not need to be certified or notarized.

**7. POLICY ON RETURN OF ORIGINAL DOCUMENTS**

If original documents are submitted to FCSA for evaluation and you would like them to be returned, please check the box to the right and indicate the address where the documents in question should be mailed. Failure to follow these instructions may result in the non-return/destruction of the documents in question, for which FCSA will not be held accountable.

Please return my original documents to the following address:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**8. COMMENTS**

Use this space to provide FCSA with additional information that could be useful in your credentials evaluation.

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**9. SIGNED STATEMENT**

I certify that all information provided in this application is complete, factually accurate, and honestly presented. I certify that I have read the instructions and conditions and agree to the terms stated therein. I understand that the evaluation is advisory and is not binding upon any agency or institution that uses it. I release Foreign Credentials Service of America from any liability for damages resulting from the use to which I or any agency or institution puts the evaluation.

Signature of Application \_\_\_\_\_ Date \_\_\_\_\_