HOPELAND INTERNATIONAL, LLC

Foreign Educational Credential Evaluation

3140 Cambrian Terrace, Austell GA 30106

Tel: 770-305-6527 **Email:** Evaluation@HopelandGp.com **Application for Evaluation:** Foreign Educational Credentials

1)	Name: (Last):
	First Name: Middle Name:
2)	Date of Birth: (M/D/Y)
3)	Your Postal Address: City:
	State: Zip: Zip:
4)	Telephone: Email: School's Address where Evaluated Credentials will be sent:
5)	Address: City:
	StateZip:
	Types of Evaluation Requested and Fees (Choose the one you want)
6)	Course – By- Course Evaluation – High School Diploma = \$165 () Course – By- Course Evaluation – Bachelor's Degree = \$180 () Course - By- Course Evaluation - Masters & PhD = \$200 () Professional Evaluation (Accounting, Nursing etc) = \$250 () Addition: Priority Evaluation for 3 days = \$100 Rush Evaluation 1 day = \$250
	Purpose of Evaluation
7)	To further Education (); Immigration (); Professional Licensing / Certification (); Employment (); Other: () Specify
8)	Normal Evaluation Time: () 10 – 15 Business Days Priority Evaluation: () 3 Business Days: Additional \$100 Rush Evaluation: () 1 Business Day: Additional \$250

List all Schools attended, dates, and certificates obtained in Chronological Order.			
Schools Attended	Dates: From - To	Certificates Obtained	
N.B: Do not transla	ate the name of the school	or certificates obtained.	
third party of your choice I certify that I have read I certify that all the inform I understand that the eva are not binding on any or	e. Extra copies will be chargand accepted all the condition at this appulation reports prepared by rganization which may use to	ions for this evaluation	

translated in English by a competent body to the address:

HOPELAND INTERNATIONAL, LLC

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Send this application with certified copies of all academic records, which should be

Send a Certified Bank Check or Money Order payable to HOPELAND INTERNATIONAL, LLC