



Company Contact
Information



Website Link



**Josef Silny & Associates, Inc.
International Education Consultants**

Tel.: (305) 273-1616

Fax: (305) 273-1338/Translation Fax: (305) 273-1984

E-Mail: info@jsilny.org

Web Site: www.jsilny.org

Mail applications to:
7101 SW 102 Avenue
Miami, FL 33173

**Application for Evaluation of Foreign Educational Credentials
For Applicants to Florida Atlantic University**

Information on Josef Silny and Associates, Inc., International Education Consultants (JS&A)

JS&A is an organization of highly qualified international education consultants. Mr. Silny is recognized nationally and internationally as an expert in the field of foreign credential evaluations and international admissions. He has been the Director of International Admissions at the University of Miami and the City University of New York. He has participated as panelist or workshop director at national professional conferences annually since 1974. He has held numerous committee chairmanships and memberships in national professional organizations and corporations. Mr. Silny has published a book and numerous articles in the field of international education. All international education consultants associated with Mr. Silny are highly qualified in the field of foreign credential evaluations. JS&A is a member of the National Association of Credential Evaluation Services, Inc. (NACES)

APPLICATION PROCEDURES - Please be sure to read the complete information on our website at www.jsilny.org.

PLEASE BE AWARE THAT WE WILL NOT PROCESS YOUR REQUEST FOR ANY SERVICE UNLESS WE RECEIVE YOUR FILLED-OUT AND SIGNED APPLICATION AND CORRESPONDING FEES. JS&A WILL NOT BE RESPONSIBLE FOR DOCUMENTS SENT TO US PRIOR TO THE RECEIPT OF THE FILLED-OUT AND SIGNED APPLICATION AND CORRESPONDING FEES.

In order to receive an evaluation, an applicant must provide the following:

1. A completed Application for Evaluation of Foreign Educational Credentials signed by the applicant.
2. A non-refundable evaluation fee in U.S. dollars. Make the bank check or money order payable to Josef Silny & Associates, Inc. (We cannot accept postal money orders or payments through Western Union). If you are paying by a credit card you must fill out the Credit Card Information form. All evaluation fees, including fees for rush report, 24 hour report, grade point average equivalent, extra copies, and translation are NON-REFUNDABLE.
3. EDUCATIONAL DOCUMENTS:
 - a) Official original diplomas and certificates in the original language
 - b) Official original transcripts in the original language (names of courses, grades, and hours of instruction) for every year of study
It is the responsibility of applicants to submit the academic credentials which need to be evaluated.
4. TRANSLATIONS: Documents in a language other than English must be accompanied by professional, certified English translations. Translations supplement, but do not replace the original documents. JS&A offers professional certified translations. JS&A is a Corporate Member of the American Translators Association. For further information on the JS&A Translation Service, call 305-273-1616 or e-mail or fax your request for translation estimate along with all pertinent documents.
E-mail: translation@jsilny.org Translation fax: 305-273-1984
5. Please note: a Syllabus of university studies (description of each course or subject studied) may be required for Course-by-Course Evaluations, but you do not need to send this with your application. If it is needed, JS&A will request it.

Processing Information: Josef Silny & Associates, Inc. reserves the right to request to review original documents and may insist that transcripts or examination results be sent directly and verified by the issuing institutions or examination boards to JS&A. Academic credentials received directly from foreign institutions are considered confidential and cannot be given to applicants. The documents you submit with your application, with the exception of any originals, will become the property of Josef Silny & Associates, Inc. and they will not be returned. Applicants who submit their own original academic documents must read page two of this application for information on return of original documents by secure means. When it has been determined that documents submitted for evaluation or translation were forged or altered in any way, no evaluation report or translation will be prepared and the fees will not be refunded. Fraudulent documents will not be returned to the applicant. All recipients indicated on the application form will be notified. It is the applicant's responsibility to submit the documents which need to be evaluated. If the application is not completed within three months, JS&A will close the file. A new evaluation fee will be required for updating the file. JS&A will keep applications with academic credentials for one year only. Please note that all fees are subject to change without notice. Refusal of service: JSA reserves the right to refuse service to anyone.

In preparing an evaluation report, every effort is made to consult appropriate resources, in order to provide the most accurate evaluation possible. JS&A will provide a list of the references used in making the specific evaluation upon written request.

PERSONAL INFORMATION

If you have a FAU user name, also known as a student I.D. or Z number, please list it here. _____

If you have a U.S. Social Security number, please list it: _____ Gender: _____
Male Female

Please use your name exactly as it appears on your passport.

Full name: _____
Last name First name Middle name Maiden name

Address: _____
Full street address Apartment number (if applicable)

_____ City State Zip code Country (if not U.S.)

Date of birth: _____ Month / Day / Year Country of citizenship: _____ Country of birth: _____

Telephone: _____ Area code and number Fax: _____ Area code and number E-mail: _____

Type of Professional Service Requested:

Basic Fees

- Translation (quote provided upon request) U.S. \$ _____
- High School Course-by-Course + GPA (U.S. \$190 basic fee)
- Post-Secondary/University Course-by-Course + GPA (U.S. \$190 basic fee)**
- Post-Secondary/University Document-by-Document + GPA (U.S. \$130 basic fee) *

Additional Services

- Extra Evaluation Report (U.S. \$20 per report) How many? _____
- Extra Report in Sealed Envelope (U.S. \$25 per report) How many? _____
- Secure Return of Originals U.S. \$ _____
- Other U.S. \$ _____

Rush Fees

- 24-Hour Evaluation (U.S. \$150 + basic fee)
- 2-Day Evaluation (U.S. \$100 + basic fee)
- 5-Day Evaluation (U.S. \$50 + basic fee)

***This evaluation is for graduate admission only.**

****Required for transfer applicants**

(mark one box) - APPLYING TO: UNDERGRADUATE OR GRADUATE ADMISSION

Have you used JS&A services previously? Translation: No: _____ Yes: _____ Date: _____
 Evaluation: No: _____ Yes: _____ Date: _____

FOR UNDERGRADUATE APPLICANTS, ONE EVALUATION REPORT WILL BE SENT ELECTRONICALLY TO FLORIDA ATLANTIC UNIVERSITY.

If you want your evaluation to be sent to other educational institution (at U.S. \$20/copy), please list their names and addresses below:

ACADEMIC HISTORY

Educational Institutions Attended (You must list all educational institutions you have attended. Begin with the first year of elementary school and include any school you are now attending.)

Name of Institution	City, Country	Attendance From - To	Diplomas or Certificates	Year of Graduation
1. _____	_____	-	_____	_____
2. _____	_____	-	_____	_____
3. _____	_____	-	_____	_____
4. _____	_____	-	_____	_____
5. _____	_____	-	_____	_____
6. _____	_____	-	_____	_____
7. _____	_____	-	_____	_____

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 (including that all fees are **non-refundable**) 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 Josef Silny & Associates, Inc. from any liability for damages resulting from the use to which I or any agency or institution puts the evaluation. Any litigation arising out of this agreement will have its venue in Miami-Dade County, Florida. The prevailing party in any litigation arising out of this agreement is entitled to reasonable attorney's fees and all costs accrued during the litigation.



Signature of the applicant: _____ Date: _____

ORGANIZATIONS WHICH ACCEPT EVALUATIONS DONE BY JS&A

JS&A is a Member of the National Association of Credential Evaluation Services, Inc. (NACES). Evaluations prepared by JS&A are accepted and recognized by the organizations listed below:

1. U.S. Federal Government

The United States Citizenship and Immigration Services
The United States Department of Agriculture
The United States Department of Defense
The United States Labor Department
The United States Office of Personnel Management
Federal Bureau of Prisons
Health Care Financing Administration

2. Licensing Boards

Accounting: Arizona, Arkansas, California, Colorado, Connecticut, District of Columbia, Florida, Guam, Indiana, Kentucky, Michigan, Missouri, Nebraska, Nevada, New Mexico, Ohio, Pennsylvania, South Dakota, Tennessee, Utah, Vermont, Virginia, Wisconsin, Wyoming
Architecture: Alaska, California
Barbers: Florida, Minnesota, South Dakota
Cosmetology: North Carolina, Tennessee, Utah, Vermont
Engineering: Alaska, Florida, Louisiana, Maryland, New Jersey, Puerto Rico, Texas, Virginia
Law: California, Florida, Texas
Marriage and Family Therapy, Mental Health: Florida
Medical Laboratory: American Medical Technologists, American Society of Clinical Pathologists, Health Care Financing Administration, California, Connecticut, Florida, Georgia, Nevada, North Dakota, Tennessee
Midwifery: Florida
Nursing: Arizona, Florida, Missouri, Nebraska, New Hampshire, New Mexico, Oregon, Puerto Rico, Wyoming
Opticianry: Florida
Psychology: California, Delaware, District of Columbia, Florida, Maryland, Ohio, Oregon, Virginia
Respiratory Care: National Board for Respiratory Care, California, Florida
Speech-Language Pathology and Audiology: American Speech-Language-Hearing Association, Florida, Georgia
Texas Medical and Dental Schools Application Service

3. State Departments of Education

Alabama, Alaska, Arizona, Arkansas, Colorado, Connecticut, Delaware, District of Columbia, Florida, Georgia, Idaho, Illinois, Iowa, Kansas, Kentucky, Maryland, Massachusetts, Minnesota, Mississippi, Missouri, Montana, Nebraska, Nevada, New Hampshire, New Jersey, North Carolina, North Dakota, Ohio, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina, South Dakota, Tennessee, Texas, Utah, Vermont, Virginia, West Virginia, Wisconsin, Wyoming

4. Other Governmental and Private Agencies

American Association for Clinical Chemistry
Association of Colleges of Osteopathic Medicine
American Association of Colleges of Podiatric Medicine
Association of American Veterinary Medical Colleges
Broward County Sheriff's Office
CASPA - Central Application Service for Physician Assistants
Florida Department of Health and Rehabilitative Services
National Career Development Association
NCAA
Office of Personnel of: City of Miami, Ft. Lauderdale, Miami Beach, New York City, State of New York

5. Hundreds of Colleges and Universities

Many other organizations which do not appear on this list may also accept evaluations done by JS&A. Applicants are advised to check with the agency, institution, or organization to which they intend to submit the evaluation to make certain that the evaluation will be recognized.



**Josef Silny & Associates, Inc.
International Education Consultants**

Tel.: (305) 273-1616
Fax: (305) 273-1338 / Translation Fax: (305) 273-1984
E-Mail: info@jsilny.org
Website: www.jsilny.org

CREDIT CARD INFORMATION

You must include the credit card holder's copies of the front and back of the credit card and U.S. Driver's License OR Foreign Passport.

Name of Cardholder:

As it appears on the credit card _____
First Middle Last

E-mail address: _____ Phone No.: _____
Area code and number

Name of Applicant:

If different from the cardholder _____
First Middle Last

Billing Address:

_____ Street address Apartment number (if applicable)

_____ City State Zip code Country (if not U.S.)

I authorize Josef Silny & Associates, Inc. to charge my (check one):

VISA MASTER CARD DISCOVER

in the **TOTAL** amount of U.S. \$ _____ **← (TOTAL amount of your order must be filled in to process your payment.)**

CREDIT CARD NUMBER: _____

3-digit security code on back of card: _____

Expiration Date (month/year): _____ 

Signature of Cardholder (Required): _____ Date: _____

This signature authorizes Josef Silny & Associates, Inc. (JS&A) to charge the amount for the requested services in U.S. dollars and the cardholder agrees to be bound by all Terms and Conditions (including that all fees are **non-refundable**) as stated in the JS&A application.