

	For Office Use Only
Ref. #:	-
Date:	
Fees:	

APPLICATION FOR NURSING LICENSURE EVALUATION

Please complete <u>ALL</u> sections of the application form and sign it. Be sure to enclose <u>ALL</u> required documentation and fees. **Incomplete (or incorrect) information or missing documentation (and/or fees) will result in a delay in the processing of your application**.

Section 1: Client Information						
Name:		(E)	0 1/1/2			
Family/L		ven/First	Second/Mid	ldle		
Name on Educational Records: (if different)	Family/Last	Given/First	Second/Middle			
☐ Male ☐ Female Date of	Birth:/// Month Day Y	Country of Study	:	her than USA)		
Mailing Address:	Month Day 1	Gai	(01	ner than ook		
Number	Str	reet	Apt. #			
City	State	Zip/Postal Cod	de Co	untry		
Telephone: ()	() Evening	Fax: ()	Cell: ()			
Day Email:	•					
Email: Last 4 Digits of Your Social Security Number: XXX – XX (if applicable) If you submit an e-mail address, IERF will e-mail you with updates on the status of your evaluation. If you do not provide an e-mail address, you can still check the status of your application on our website at www.ierf.org .						
Have you previously used the se		s if yes Date:	File #:			
How did you learn about IERF? (cl		, ii yes, Dale		-		
☐ Educational Institution		oord D National Pr	ofessional Association	/Cartification Board		
	☐ State Licensing/Certification Bo					
☐ Attorney	☐ Friend ☐ Rec	cruiter	□ Advertisemer	ıt		
☐ Other (please specify):						
Section 2: Purpose of the Evaluation (check appropriate boxes) Please refer to our website (www.ierf.org) for the list of state boards that accept IERF evaluations. Please indicate below the state						
board(s) to which you wish to ap				aloato poloti illo otato		
For the Nursing Board(s) in: \Box _			□			
If you are applying for licensure as a nurse practitioner, please also specify an area of specialization (e.g., Family Nurse Practitioner, etc.):						
Section 3: Educational History						
List all educational institutions you have attended or are attending, including secondary institutions. Include the name of each certificate/diploma as it appears on your document(s). Use a separate sheet if necessary.						
Name of Institution	Locatio (city/cour		(month/ Ce	ame of Diploma or ertificate if <u>Awarded</u> n original language)		
Are you licensed to practice nursing in your home country or in another state in the US? Yes (if yes, please be sure to submit copies of all related documents – see Section 7.) No (if no, please explain why):						

Section 5: Services and Fees

A. REPORT Please note that there is no rush service available for Nursing licensure evaluations. 1. Nursing Evaluation (\$350) 2. Evaluation for Additional State Boards (add \$150 each) \$ ____ **B. ADDITIONAL SERVICE** Photocopying Fee, if applicable (add \$20) \$ C. MAILING OPTIONS As required by all Nursing state boards, your evaluation will be addressed and mailed directly to the Board. 1. **Evaluations** (prices are per address) **Domestic** Regular Mail ■ applicant □ state board(s) in: Secure Mailing (add \$20 each) applicant ☐ state board(s) in: Next Day Delivery (add \$35 each) ■ applicant ☐ state board(s) in: ___ International Secure Mailing (add \$75) \$ □ applicant 2. Return of Original Documents Submitted by Applicant Domestic Secure Mailing (add \$20) Domestic Next Day Delivery (add \$35) International Secure Mailing (add \$75)

A. REPORT

A file number will be assigned and notification will be sent upon receipt of the application.

Please note that evaluation reports may vary, depending on the individual requirements of each state board.

- Nursing Evaluation \$350 per application. This report identifies institutions attended, dates of attendance, credential(s) earned, and the United States educational equivalent. It also lists individual courses taken and an overall grade point average (where applicable). A coursework evaluation checklist, which identifies areas of training is also included.
- Evaluation for Additional State Boards One official board copy and one applicant copy are included in the report fee. Reports for additional boards requested at the time of application are \$150 per state.

Note: Once a report has been mailed, duplicate/revised copies of a nursing evaluation require a separate application form and fees.

B. ADDITIONAL SERVICE

Photocopying Fee – Please submit a set of photocopies (front and back) if you are submitting original documents (including translations). Otherwise, you will be assessed a \$20 fee.

C. MAILING OPTIONS

- Evaluations Evaluations are sent by regular mail. Secure
 Mailing may be requested for an additional fee of \$20
 (domestic) and \$75 (international) per address. Next Day
 Delivery (domestic) may also be requested for an additional
 \$35.
- 2. Return of Documents If submitting original documents, please select either Secure Mailing (\$20 for domestic and \$75 for international) or Next Day Delivery (\$35 for domestic) for the return of your academic records. These mailing options will have a tracking number. Otherwise your documents will not be returned to you, unless you instruct us in writing to return them via regular mail. IERF accepts no liability related to the loss or damage of documents during mailing.

D. PAYMENTS

- Payment in the form of a check, cashier's check, money order or credit card must accompany all applications, payable to IERF. For credit card payment (Visa or MasterCard only), please complete the Credit Card Information Form (available on our website at www.ierf.org).
- Overseas payments must be in U.S. dollars and drawn on a United States bank. If payment is being made by a bank draft, an additional \$15 processing fee is required.
- Fees are subject to change without notice.

Section 6: Certification

- 1. I certify that the information provided in this application is true and correct.
- 2. I certify that I have read the instructions and conditions in this application and that I understand and accept the terms and conditions stated.
- 3. I understand that the information provided by IERF on this application (or on its website) is subject to change at any time.

TOTAL \$ _____

- 4. I understand that the evaluation reports prepared by IERF are advisory and are not binding upon any agency, institution or organization which may use them.
- 5. I release IERF from any liability for damages resulting from the use of an evaluation report by me or any third party.
- 6. I authorize IERF to release information about my application status and copies of my educational records where these are required by the agency for whom the evaluation is being prepared prepared.
- 7. I acknowledge that the evaluation report, based on IERF research, may differ from my own interpretation or that provided by another party.
- 8. I release IERF from any liability for damages to or loss of any documents submitted.
- I agree to reimburse IERF for any and all costs, including legal expenses, which may incur as a result of any claim that I (or anyone having any interest in my earnings or services) may make, based on the recommended equivalency.

3	4	
Name (printed)	Signature	Date
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If the signature on this application is not that of the person whose credentials are being submitted for evaluation, the act of signing certifies that the signatory has the authority to sign for and on behalf of the person whose educational credentials have been submitted for evaluation.

DOCUMENT REQUIREMENTS

Please note that all records received from the institution(s) of study, licensing authority, or examination authorities will become the property of IERF and will not be returned to the applicant.

- A. The following must be mailed DIRECTLY to IERF by the institution(s) of study:
 - 1. The Transcript Request Form (TRF), which can be downloaded from our website at www.ierf.org.
 - 2. Official academic records issued in the original language.

Transcripts/Mark Sheets/Examination Results indicating courses/subjects, hours of study/units/credits, and grades/marks/examination results.

Diplomas / Graduation Certificates / Degree Certificates indicating that a degree/qualification has been earned or that a program of study has been completed, if applicable.

- 3. Related Learning Experience (if you earned your nursing degree in the Philippines)
- 4. Hours of instruction for theoretical/practical training for ALL nursing courses (medical, pediatric, etc.), if not provided on the transcript or course descriptions. Please note that Weeks/Months/Years of instruction are NOT acceptable.
- 5. Course Syllabi (for Florida, Texas and Washington)

Course syllabi for all studies completed by the individual are required. Please be sure that the subjects in the course syllabi match the subjects listed on the academic records, and that they are in the same order and for your period of study. Any discrepancies may delay the evaluation. Please visit www.ierf.org for a sample course syllabus.

6. Course Descriptions (for all other states)

Course descriptions for all studies completed by the individual are required. Please be sure that the names of the subjects in the course descriptions match the names of the subjects on the student's academic records, and appear in the same order. Any discrepancies will delay the evaluation. Please visit www.ierf.org for a sample course description.

- B. The following must be mailed DIRECTLY to IERF by the licensing authority in any country where you are or have been licensed (other than the U.S.):
 - The IERF Nursing Licensure Verification Form, which can be downloaded from our website at www.ierf.org. If there is no separate nursing licensure procedure in your home country, please have your school fill out the LVF and mail it to IERF.
- C. The following must be mailed to IERF by the applicant:

Please submit clear and eligible photocopies of the front and back of the following documents:

1. Nursing License/Membership

If you have passed the nursing licensure examination, hold a nursing license, or hold a professional membership in your country of study or any other country (including the U.S.), please submit copies of all related documents.

2. Previous IERF Evaluation

If a nursing evaluation was previously completed by IERF, please submit a copy of the original evaluation and checklist.

3. Additional Academic Records (if applicable)

If the school where you were trained has closed down and the educational records have not been archived at another academic institution, please submit a letter to IERF that explains your case.

4. Translations

Professional translations must be submitted for all records not officially issued in English. These include translations for transcripts, diplomas, course syllabi, professional licensure, etc. The translation must be in the same format as the original-language documents, line-by-line, word-for-word, and must be typed.

IERF has negotiated a special discount with University Language Services for our applicants who use their translation services. You can contact them directly through their website to learn more about the discount.

D. The following are state-specific board requirements:

Arkansas State Board of Nursing:

The Arkansas State Board of Nursing requires proof of English language proficiency. Please have your **TOEFL/TOEIC/IELTS/TSE results** sent directly to IERF by the examination authorities. Please note that all records received from the examination authorities will become the property of IERF and will not be returned to the applicant.

2. Texas Board of Nursing

Internationally-educated applicants who have **never obtained a license** and/or who have **never worked in their country of study** only have **four years** to take and pass the NCLEX. If you were never licensed and/or were never employed as a nurse in your country of study, and you earned your nursing qualification more than four years ago, please contact the Texas Board of Nursing directly to find out more about their licensure requirements.

3 Vermont State Board of Nursing

The Vermont State Board of Nursing requires the last 4 digits of your Social Security Number (SSN). Please be sure to provide this information in the Client Information section on page 1 of this application. If you do not have a SSN, please note that you will not be able to apply for licensure in the State of Vermont.

Also, please submit your original academic records for secondary school (e.g., diploma and transcripts, maturity certificate, or examination certificate). These will be returned to you when the evaluation is mailed.

APPLICATION PROCEDURE

- 1. There are no rush services for Nursing licensure evaluations.
- 2. Copies of all files are forwarded for consultation to a nursing specialist, who is employed by IERF.
- 3. Allow a minimum of 30 business days (6 weeks) from the receipt of all required documentation (and/or fees) for your evaluation to be mailed.
- 4. As required by all Nursing state boards, your evaluation will be addressed and mailed directly to the Board.

Section 8: Terms and Conditions

- 1. **Advisory** The evaluation reports prepared by IERF are advisory in nature and in no way limit an agency or institution in making its own determination as to the level of education and allocation of credit to be allowed for the foreign credentials. IERF is not liable for consequential damages if the desired equivalency is not recommended.
- 2. **Agency Criteria** Any questions concerning specific requirements and procedures for licensure, employment, or admissions criteria should be addressed by the applicant to the appropriate licensing board, agency or institution.
- 3. Altered or Irregular Documents If forged, altered, or falsified documents are submitted to IERF, the request for evaluation will be immediately cancelled. All documents (original and photocopies) become the property of IERF. No refund will be issued. The information will be made available to the appropriate parties (academic institutions, government agencies, professional organizations and other evaluation services)
- 4. **Applicable Law** In the event of any disputes between the applicant and IERF, such disputes shall be governed by California law and shall be subject to the jurisdiction of the Los Angeles County courts.
- 5. **Contact** IERF services are conducted solely by regular mail and the internet. Academic records, however, may only be submitted by regular mail or Courier Service.
- 6. **Correspondence** Changes to an application must be submitted in writing. Once the evaluation is completed, an applicant has 90 days from the date of issue of the evaluation report within which to raise any questions concerning its content. Thereafter, the file will be closed.
- 7. **Damaged or Lost Documents** Original documents submitted by the applicant are returned by a secure mailing service. While every effort is made by IERF to ensure the proper handling of educational documents, IERF accepts no liability related to the loss or damage of documents.
- 8. Limited Liability of Service
 - a) **Delay:** While every effort will be made to complete the evaluation within the requested timeframe, IERF cannot guarantee processing times and assumes no liability related to the delay of an evaluation report.
 - b) Report: IERF shall not be responsible for any incidental or consequential damages that an applicant may incur if the educational equivalency anticipated by the applicant is not issued as the evaluation report, based on IERF research, may differ from an applicant's interpretation or that provided by another party. IERF shall not be liable for any damages resulting from the use of the evaluation report. Furthermore, the applicant agrees to reimburse IERF for any and all costs, including legal expenses, which may incur as a result of any claim that the applicant (or anyone having any interest in the applicant's earnings or services) may make, based on the recommended equivalency.
- Reassessment of Equivalencies IERF bases its evaluation analysis on the best information available to professionals in applied
 comparative education in the United States at the time when the evaluation is made. When additional information becomes available, IERF
 reserves the right to reassess educational equivalencies when copies of an evaluation report are requested.
- 10. **Re-Evaluation Request** Evaluations based on documents not submitted with the original request are considered to be new evaluations, and a new payment of the fee is required. Requests to change a General Report to a Detail Report (or the reverse) will be subject to the fee applicable to that report. The amount paid for any previous evaluation report is not credited toward the charge for a re-evaluation.
- 11. Refunds No refunds will be issued once an application has been submitted, even if the applicant disagrees with the evaluation.
- 12. Returned Checks a check that is returned due to insufficient funds is subject to an additional \$30 fee.
- 13. **Verification** IERF reserves the right to contact educational and governmental institutions for additional information and/or verification of the authenticity of the credentials submitted, including, but not limited to, sending copies of credentials to the institution.
- 14. Authorization for Release IERF may release information about an applicant's status including copies of educational records where these are required by the agency for whom the evaluation is being prepared.
- 15. Refusal of Service IERF reserves the right to refuse service to anyone.
- 16. Information Subject to Change The information provided by IERF on this website and on the application is subject to change at any time.

P.O. Box 3665, Culver City, California 90231-3665, USA Tel: 310.258.9451; Fax: 310.342.7086 www.ierf.org; Email: information@ierf.org

Charter Member of the National Association of Credentials Evaluation Services (NACES) - www.naces.org

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