



APPLICATION FOR NURSING LICENSURE EVALUATION

Please complete **ALL** sections of the application form and sign it. Be sure to enclose **ALL** 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.**

Please note that, at this time, **IERF is NOT able to accept applications for nursing credentials earned in Cameroon, Cuba, Haiti or Nigeria.**

Section 1: Client Information

Name: _____
Family/Last Given/First Second/Middle

Name on Educational Records: _____
(if different) Family/Last Given/First Second/Middle

Male Female Date of Birth: ____/____/____ Country of Study: _____
Month Day Year (other than USA)

Mailing Address: _____
Number Street Apt. #

_____ City State Zip/Postal Code Country

Telephone: () _____ () _____ Fax: () _____ Cell: () _____
Day Evening

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.

Have you previously used the services of IERF? No Yes if yes, Date: _____ File #: _____

How did you learn about IERF? (check appropriate boxes)

Educational Institution State Licensing/Certification Board National Professional Association/Certification Board

Attorney Friend Recruiter Internet Advertisement

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 apply. This information must be specified for the completion of an evaluation.

For the Nursing Board(s) in: _____ _____ _____ _____ _____

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	Location (city/country)	Entered (month/year)	Departed (month/year)	Name of Diploma or Certificate if <u>Awarded</u> (in original language)

Section 4: Fees

A. REPORT

There are no rush services for nursing licensure evaluations, as copies of all files are forwarded for review to a nursing education specialist, who is employed by IERF.

1. **Nursing Evaluation** (\$525) \$ _____

2. **Evaluation for Additional State Boards**
(add \$250 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

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) \$ _____

TOTAL \$ _____

Section 5: Services and Fees

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.

1. **Nursing Evaluation** – \$525 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 customized coursework evaluation checklist is also included, and identifies whether the state board's minimum educational requirements have been met.

2. **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 \$250 per state.

Note: Once a report has been mailed, duplicate/revised copies of a nursing evaluation require a separate application form and fees. Applicant files and documents are only kept for 5 years. Returning applicants seeking additional reports after the 5-year period must submit a new application and new fees, along with their academic records.

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

1. **Evaluations** – Evaluations are sent via regular mail unless otherwise requested. There is no additional fee for regular mail. If you prefer mailing with a tracking service (e.g., UPS, DHL, etc.), we offer Secure Mailing for an additional \$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, we recommend that you select either Secure Mailing or Domestic Next Day Delivery for the return of your academic records. Please note that the original documents that you submit will not be returned to you via regular mail, unless you instruct us in writing to do so. 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, and must be 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: Previous Licensure

Have you ever been licensed to practice nursing in your country of study, in any other country, or within any state in the US (even if your licensure has lapsed)?

Yes (please specify all countries and states): _____

No (please explain why): _____

I certify that the above information is truthful and correct.

Section 7: Required Documentation

Document Requirements for All States

The applicant must arrange for the following to be submitted to IERF. The application fee only covers the completion of an evaluation. IERF will not be contacting the institution(s) of study or the licensing authority(ies) on your behalf to obtain the required documentation. The document requirements listed below have been established by the state boards. As such, IERF will not be able to proceed with an evaluation until all required documents have been received. All records received from the institution(s) of study, examinations authorities, or the licensing authority will become the property of IERF and will not be forwarded to the applicant. Any discrepancies in the information provided by your school will delay the evaluation.

Mailed DIRECTLY to IERF by the Institution(s) of Study

Please forward the **Transcript Request Form** (which can be downloaded from our website) to your educational institution(s), request that they fill out all the information on the form, and that they mail it directly to IERF, along with the documents outlined below. If applying for licensure in the state of Washington, however, please contact us at alliedhealth@ierf.org for further instructions regarding the Transcript Request Form for Washington (TRF). In your e-mail, please specify that you are seeking licensure in the state of Washington.

Official Academic Records (issued in the original language):

1. **Transcripts/Mark Sheets/Examination Results** indicating courses/subjects, hours of study/units/credits, and grades/marks/examination results.
2. **Diplomas/Graduation Certificates/Degree Certificates** indicating that a degree/qualification has been earned or that a program of study has been completed, if applicable.

Related Learning Experience (for Studies Completed in the Philippines only)

If you earned your nursing degree in the Philippines, the Related Learning Experience (RLE) is also required.

Theoretical & Practical Hours Information

The number of theoretical and practical hours must be submitted for each course. This information is usually provided in a separate document by the school. Please note that Weeks/Months/Years of instruction are NOT acceptable.

Course Syllabi

Detailed course syllabi for all nursing courses are required, and must be from your time of study. A syllabus provides detailed information about the course objectives and content. Please visit our website for a sample syllabus that you may forward to your institution(s) of study.

Mailed DIRECTLY to IERF by the Licensing Authority

Please forward the **License Verification Form** (which can be downloaded from our website) to the licensing authority in any country where you are or have been licensed (other than the U.S.), as IERF is required to verify any previous licensure, even if your licensure has lapsed.

If there is no separate nursing licensure procedure in your country of study, please have your school fill out the LVF and mail it to IERF, along with a letter of explanation.

Mailed to IERF by the Applicant

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

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 a copy of your license, even if your licensure has lapsed. If you have also ever been licensed in the U.S., please submit a copy of your license, even if your licensure has lapsed.

Previous IERF Evaluation

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

Translations

Professional translations must be submitted for all records not officially issued in English. These 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 (www.universitylanguage.com/translations-for-ierf/) to learn more about the discount. Please note that some of our applicants have found that getting professional translations done in their country of study to be less expensive. Upon selecting a professional translation agency, please arrange for them to receive a copy of the records being sent by your school. The prepared translations should then be sent to IERF. If submitting original translations, please also include a set of clear, legible and full-sized photocopies (front and back). Otherwise, you will be assessed a \$20 fee. Photocopies become the property of IERF.

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 forwarded to the applicant.

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, as an evaluation is not possible.

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 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.

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 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, unless instructed otherwise by the applicant in writing. 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**
 - 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.
 - 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.
- 9. 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 or when a new report is requested based upon the previously submitted documents.
- 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.
- 12. Returned Checks** - A check that is returned due to insufficient funds is subject to an additional \$25 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 relevant educational institution(s) and/or governmental institution(s).
- 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 its website and on the application is subject to change at any time.

Section 9: 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.
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.
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.
9. 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.

Name (printed)

Signature

Date

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.

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