

Company Contact Information



Website Link



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

**OR EMAIL TO:** processing@jsilny.org

# 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

# Application for Evaluation of Foreign Educational Credentials for Kentucky Board of Nursing

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 a 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. IF ACADEMIC CREDENTIALS ARE SENT TO US FROM ISSUING INSTITUTIONS, BE SURE THAT WE RECEIVE YOUR FILLED OUT APPLICATION WITH PAYMENT FIRST. IT IS THE APPLICANT'S RESPONSIBILITY TO SUBMIT THE DOCUMENTS WHICH NEED TO BE EVALUATED.

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 <u>non-refundable</u> 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, grade point average equivalent, extra copies, and translation are NON-REFUNDABLE.
- 3. EDUCATIONAL DOCUMENTS:
  - a) Official diplomas and certificates in the original language
  - b) Official transcripts in the original language (names of courses, grades, and hours of instruction) for every year of study
- 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

Processing Information: For nursing licensure: transcript, and degree, must be sent by the issuing institution(s) directly to JS&A and will be verified. 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. 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. All recipients indicated on the application form will be notified. If the application is not completed within one year, 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: JS&A 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. JS&A does not discriminate among applicants as to the age, sex, race, religion, national origin, disability, or marital status.

# PROCESSING TIME

- 1. <u>Standard Processing Time</u>: Evaluations are normally prepared in at least 15 working days from the receipt of all required fees, information, documentation and verifications. Evaluations which require extensive research and correspondence may take longer to prepare.
- 2. Rush Evaluation Reports

10-Working Days Rush Evaluation Report

Rush evaluation reports will be completed in a timely fashion, upon receipt of all required fees, information and documentation. If, for any reason, the evaluation report cannot be completed within the specified time after receipt of all required fees, information and documentation, the rush fee will be refunded and the evaluation will be completed as quickly as possible. The rush fee will be adjusted to reflect the actual processing time and a refund of the difference will be issued. Rush evaluation reports must be paid for by bank check, money order or credit card.

#### COST OF EVALUATIONS

- 1. Licensing: Nursing U.S. \$150 basic fee
- 2. 10-Working Days Rush Evaluation Report U.S. \$100 in addition to the basic fee
- 3. Re-evaluation Re-evaluations based on documents not submitted with the original request are considered new evaluations and a second payment of the basic fee \$150 is required.
- 4. Extra evaluation reports Additional original evaluation reports requested at the time of evaluation cost \$20 each. Each evaluation report requested after the evaluation has been completed costs \$30 (evaluations may be available <u>only</u> within 3 years of the original date of issuance). Please add \$5 to the cost of each report that you wish to be mailed to you in a specially sealed JS&A envelope.
- 5. Return of original documents by secure means:

Within the continental United States: - By Priority Mail: U.S. \$25 per address

- By courier: U.S. \$50 per address

Outside of the United States - By international courier: U.S. \$90 per address

JS&A does not accept courier airbills filled out by applicants.

If the fee paid by the applicant does not cover the cost of the courier, we may use USPS Priority Mail Express instead.

Those in extended delivery areas will be billed for the balance of the fee.

JS&A accepts no liability for loss or damage of academic credentials during mailing.

6. The applicants are responsible for any verification fees charged by their universities.

# INFORMATION ABOUT EVALUATIONS

<u>Sending your evaluation</u> - Your evaluation will be sent electronically to Kentucky Board of Nursing. If you would like to send your evaluation to yourself, or anyone else, select an extra evaluation report service and list the name and address in this application.

Method of Operation - To keep the cost of evaluations as low as possible, the evaluation service is conducted by mail. If there are questions concerning an application, Josef Silny & Associates, Inc. will e-mail, write, or telephone the applicant. If the applicant requests a personal interview, the charge will be U.S. \$100 per half hour. Interviews are by appointment only.

Reassessment of Education Systems - Evaluations are based upon the best information and resources currently available to foreign credential evaluators in the United States. Josef Silny & Associates, Inc. reserves the right to reassess educational systems as new and additional information becomes available.

<u>Satisfaction with Evaluations</u> - JS&A generally follows the Placement Recommendations of The National Council on the Evaluation of Foreign Educational Credentials. JS&A guarantees that all evaluations are prepared by highly qualified evaluators, but it cannot guarantee that the applicant will agree with the evaluation. Any questions or concerns about evaluations must be submitted in writing.

PERSONAL INFORMATION			Gender: $\square$ $\square$ Male Female		
Full name:  Last name		0:	XC18	0.6.1	
Last name		Given name	Middle name	Middle name/Maiden name	
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			(	if applicable)	
City	State	Zip code	Country (if not U.S.)		
ate of birth: Month / Day / Year	Country of citizer	Country of citizenship:		Country of birth:	
elephone: Area code and number		E-n	nail:		
		number			
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valuation Basic Fee		Additional Services			
Licensing: Nursing (U.S. \$150 basi valuation Rush Fee	c fee)	Extra Evaluation Report	t (U.S. \$20 per report) How many? Envelope (U.S. \$25 per report) How i	many?	
10-Day Rush Evaluation (U.S. \$10	0 + basic fee	Secure Return of Origin	als U.S. \$	папу:	
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		Other U.S. \$			
om whom did you learn of Josef Sil	ny & Associates, Inc.:				
ave you used JS&A services previou	ısly? Translation:	No:Yes	s: Date:		
ive you used isee it services previou		No: Yes	s: Date:		
		nstitutions you have atte	ended. Begin with the first year of ele	ementary school a	
clude any school you are now attend	ing.)				
Name of Institution	City, Country	Attendance From - To	Diplomas or Certificates	Year of Graduation	
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the undersigned applicant, certify and reversed and understand the instruction evaluation is advisory and is not bind the mutual undertakings by the paraployees, and agents, from any liability any original documents. In addition, and	epresent that all information properties and conditions (including ling upon any agency or institutes as stated in this Applit or damages resulting from: (any litigation arising out of this	rovided in this Application that all fees are <b>non-re</b> letution that uses it. Furthetection ("Agreement"), the a) the use to which I or a Agreement will be under	plication and follow the requirements spans is complete, factually accurate, and hon <b>fundable</b> ). I agree to the terms stated er, in consideration of the payment by the undersigned applicant releases JS& any agency or institution puts the evaluar Florida law, and venue will be in Mianaey's fees and all costs accrued during the	estly presented, and herein. I understan ne undersigned app A, its officers, direction, and (b) for the mi-Dade County, Fl	
gnature 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

USCIS -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. U.S. Armed Forces

Air Force

Army

Marines

# 3. Licensing Boards

Accounting: Arkansas, California, Colorado, Connecticut, Florida, Indiana, Kentucky, Michigan, New Mexico, Ohio, Pennsylvania,

South Dakota, Tennessee, Virginia

Architecture: Alaska, California

Barbers: Colorado, Delaware, Florida, Hawaii, Kansas, Michigan, Minnesota, Montana, New Hampshire, New Jersey, Pennsylvania, South

Carolina, South Dakota, Tennessee, Texas, Utah, Vermont, Virginia, Wyoming

Cosmetology: Colorado, Delaware, Georgia, Hawaii, Kansas, Louisiana, Michigan, Minnesota, Montana, New Hampshire, New Jersey,

North Carolina, Pennsylvania, South Carolina, Tennessee, Texas, Utah, Vermont, Virginia, Wyoming

Engineering: Alaska, Florida, Louisiana, Maryland, New Jersey, Puerto Rico, Texas, Virginia

Law: California, Florida, Texas

Marriage and Family Therapy, Mental Health: Florida

Massage Therapy: California, Florida, Hawaii, Iowa, Maryland, Michigan, Nevada, Texas, Utah, Virginia

Medical Laboratory: American Medical Technologists, American Society of Clinical Pathologists, Health Care Financing Administration,

California, Connecticut, Florida, Georgia, Nevada, North Dakota, Tennessee

Nursing: Alabama, Arizona, Arkansas, California (vocational nursing only), Colorado, District of Columbia, Florida, Hawaii, Idaho, Illinois, Indiana, Kentucky, Louisiana, Massachusetts, Michigan, Missouri, Montana, Nebraska, Nevada, New Hampshire (license by endorsement only), New Mexico, North Dakota, Northern Mariana Islands, Oklahoma, Oregon, Pennsylvania, Puerto Rico, South Carolina,

Texas, Utah, Vermont, Virginia, Washington, Wyoming

**Opticianry:** Florida

**Psychology:** Alabama, Arizona, California, Connecticut, Delaware, District of Columbia, Florida, Georgia, Hawaii, Iowa, Kansas, Kentucky, Maine, Maryland, Michigan, Minnesota, Missouri, Nebraska, Nevada, New Hampshire, New Jersey, New York, North Carolina, Ohio, Oklahoma, Oregon, Rhode Island, South Carolina, South Dakota, Tennessee, Texas, Utah, Vermont, Virginia, Washington, West

Virginia and Wyoming.

Respiratory Care: National Board for Respiratory Care, California, Florida

Social Work: Florida

Speech-Language Pathology and Audiology: American Speech-Language-Hearing Association, Florida, Georgia

**Texas Medical and Dental Schools Application Service** 

### 4. Teacher Certification

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

West Virginia, Wisconsin, Wyoming

# 5. 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

#### 6. 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.



APPLICANT'S CONSENT FOR RELEASE OF NURSING SCHOOL INFORMATION TO JOSEF SILNY & ASSOCIATES, INC., INTERNATIONAL EDUCATION CONSULTANTS

I,
APPLICANT'S NAME:
APPLICANT'S SIGNATURE:
DATE:

This form must be completed and signed by the applicant and sent to Josef Silny & Associates, Inc., International Education Consultants upon application of service.

Josef Silny & Associates, Inc.
International Education Consultants
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Miami, FL 33173
Tel: (305) 273-1616 Fax: (305) 273-1338

E-Mail: info@jsilny.org www.jsilny.org



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# **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:	P	hone 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 & Assoc	ciates, Inc. to charge my	(check one):	
□ VISA □ MASTER CARD	□ DISCOVER		
in the <u>TOTAL</u> amount of U.S. \$	<u>← (TOTAL a</u>	mount of your order must	t be filled in to process your pay
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.