



Company Contact
Information



Website Link



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

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

Tel.: (305) 273-1616
Fax. (305) 273-1338/Translation Fax: (305) 273-1984

OR EMAIL TO:
payment@jsilny.org

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

Application for Evaluation for Boards of Professional Engineers

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.

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

1. A completed Application for Evaluation for Boards of Professional Engineers signed by the applicant
2. A non-refundable evaluation fee of \$400 (This includes one evaluation report for the appropriate Board of Professional Engineers.) This fee is for only **one** board of professional engineers. A separate fee of \$400 is required for each additional state board of professional engineers. Make the bank check or money order payable to Josef Silny & Associates, Inc. If you are paying by credit card you must fill out the Credit Card Information form. All evaluation fees, including fees for rush services, extra evaluation reports, etc. are NON-REFUNDABLE. Please note that all fees are subject to change. Re-evaluations based on documents not submitted with the original request are considered new evaluations and a second payment of the basic fee U.S. \$400 is required.
3. EDUCATIONAL DOCUMENTS:
 - A. Transcripts, degrees and detailed course descriptions must be sent to us directly by the issuing universities.
 - B. 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

It is the responsibility of applicants to submit the academic credentials which need to be evaluated.

PROCESSING INFORMATION

The academic credentials received by our company will be kept on file for one year only and will not be given to the applicant. It is the applicant's responsibility to arrange for the necessary academic credentials to be sent by the issuing institution to our office. If the application is not completed within one year, we will close the file. A new evaluation fee will be required for updating the file. Any questions or concerns about the evaluation must be submitted in writing during the year in which the application and credentials are kept on file.

PROCESSING TIME

1. Standard Processing Time: Evaluations are normally prepared in 15 to 20 working days from the receipt of all required fees, information and documentation. 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.

ACCEPTANCE OF OUR EVALUATIONS

At present, the following boards of engineering accept our **foreign** credential evaluations: **Alaska, Florida, Louisiana, Maryland, New Jersey, Puerto Rico, Texas, Virginia**. The Florida Board of Professional Engineers accepts our evaluations of study completed at regionally accredited institutions of higher education in the United States. Before you request such an evaluation for a board of any other state, please make sure that this evaluation will be accepted.

SATISFACTION WITH EVALUATIONS

Our evaluations are based on the ABET requirements and the specific requirements of each Board of Professional Engineers. 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 within the year during which the application and academic credentials are kept on file. Refusal of service: JS&A reserves the right to refuse service to anyone.

PERSONAL INFORMATION

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

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

Address: _____
Apartment number (if applicable)

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

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

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

Type of Professional Service Requested:

Evaluation Basic Fee

☐ Licensing: Engineering (U.S. \$400 basic fee) Add
U.S. \$400 for each additional State Board of
Professional Engineers

Evaluation Rush Fee

☐ 5-Day Rush Evaluation (U.S. \$200 + basic fee)
☐ 10-Day Rush Evaluation (U.S. \$100 + 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? _____
☐ Translation (quote provided upon request) U.S. \$ _____
☐ Other U.S. \$ _____

Please list the Boards of Professional Engineers for which the evaluation is being prepared: _____

From whom did you learn of Josef Silny & Associates, Inc.? _____

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

If you want your evaluation sent to any Board of Professional Engineers (at U.S. \$20 per report), please list name and address 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, the undersigned applicant, certify and represent that all information provided in this Application is complete, factually accurate, and honestly presented, and that I have read and understand the instructions and conditions (including that all fees are **non-refundable**). I agree to the terms stated herein. I understand that the evaluation is advisory and is not binding upon any agency or institution that uses it. Further, in consideration of the payment by the undersigned applicant, and the mutual undertakings by the parties as stated in this Application ("Agreement"), the undersigned applicant releases JS&A, its officers, directors, employees, and agents, from any liability or damages resulting from: (a) the use to which I or any agency or institution puts the evaluation, and (b) for the loss of any original documents. In addition, any litigation arising out of this Agreement will be under Florida law, and venue will be in Miami-Dade County, Florida. The prevailing party to 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: _____

Application must be signed by hand or digital signature (not typed). By signing you agree to all terms on this agreement.

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: Florida, Minnesota, South Carolina, South Dakota
Cosmetology: Georgia, Louisiana, Minnesota, North Carolina, South Carolina, Tennessee, Utah, Vermont
Engineering: Alaska, Florida, Indiana, Louisiana, Maryland, New Jersey, Puerto Rico, Texas, Virginia
Law: California, Florida, Texas
Marriage and Family Therapy, Mental Health: Florida
Massage Therapy: California, Florida, Michigan, Nevada, 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, Ohio, Oklahoma, Oregon, Pennsylvania, Puerto Rico, South Carolina, Texas, Utah, Vermont, Virginia, Washington, Wyoming
Opticianry: Florida
Psychology: California, Delaware, District of Columbia, Florida, Maryland, Ohio, Oregon, Virginia
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. State Departments of Education

Alabama, Alaska, Arizona, Arkansas, 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.



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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: _____ 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.