



# Global Credential Evaluators, Inc.

Phone: 800-707-0979 Internet: [www.gceus.com](http://www.gceus.com) FAX: 979-690-8464  
APPLICATION FOR REPORT REQUEST, RETURN DOCUMENTS, REVIEW

For Office Use Only
Ref # _____
Date _____

Evaluation Information: Reference #: \_\_\_\_\_ Date Completed: \_\_\_\_\_

Name: \_\_\_\_\_  
Family/Last Given/First Second/Middle

Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_  
Month Day Year Phone \_\_\_\_\_ Email \_\_\_\_\_

EMAIL official report (\$30 per email address)

Email: \_\_\_\_\_ Email \_\_\_\_\_

PRIORITY MAIL official report U.S. address (\$40 per report)  EXPRESS MAIL official report U.S. address (\$60 per report)

\_\_\_\_\_  
Name/Contact/Company

\_\_\_\_\_  
Name/Contact/Company

\_\_\_\_\_  
Number Street Apt/Ste #

\_\_\_\_\_  
Number Street Apt/Ste #

\_\_\_\_\_  
City State Zip Code

\_\_\_\_\_  
City State Zip Code

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Phone

INTERNATIONAL EXPRESS MAIL official report address (\$100 per report)

\_\_\_\_\_  
Name/Contact/Company

\_\_\_\_\_  
City State Zip Code

\_\_\_\_\_  
Number Street Apt/Ste #

\_\_\_\_\_  
Phone

Include Submitted Educational Documents (\$25 per email; \$50 U.S. address; \$100 International address)

Email: \_\_\_\_\_

\_\_\_\_\_  
Name/Contact/Company

Email: \_\_\_\_\_

\_\_\_\_\_  
Number Street Apt/Ste #

\_\_\_\_\_  
City State Zip Code

Correction OR Review (\$50 – include written questions/concerns)

(continue on 2<sup>nd</sup> page if necessary)

METHOD OF PAYMENT \_\_\_\_ Visa \_\_\_\_ MasterCard \_\_\_\_ Check Card

Credit Card Number

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Expiration Date: Month \_\_\_\_\_ Year \_\_\_\_\_ CVC\*\* \_\_\_\_\_ Amount to be charged \$ \_\_\_\_\_

\*\* The CVC number can be found on the back of Visa and Master Card on the signature strip and is 3 numbers long.

\_\_\_\_\_  
Name (printed) Signature Date

Billing Address:

\_\_\_\_\_  
Number Street Apt # City State Zip Code

submit form here: <https://www.gceus.com/upload>