**APPLICATION FOR ASSESSMENT OF CREDENTIALS**

**INSTRUCTIONS AND GUIDELINES**

The National Accreditation and Equivalency Council of The Bahamas (NAECOB) has responsibility for the verification and evaluation of educational qualifications to determine equivalencies. Applicants requesting evaluation of qualifications will receive a basic report. This report will describe each credential submitted and give the national and/or international equivalencies for each.

**GUIDELINES**

1. Eachcompleted application **MUST** be accompanied by the following supporting documents:
* **Official transcript(s) mailed from the institution or in sealed and stamped envelope from the Institution.**
* **Clear, certified photocopies of degrees, diplomas, academic certificates, etc. issued by institutions attended and/or awarding bodies.** (Documents must be certified by a Justice of the Peace (JP) or Notary Public.)
* **Course syllabus, inclusive of course description for all credentials requesting to be evaluated, where applicable.**
* **Any portfolio of relevant professional experiences where applicable.**
* **Certified translation of all foreign documents that are not in English (NB: certified photocopies of both the original document issued and the translation are required).**
1. NAECOB will retain a record of the application, supporting documents and evaluation report(s) for a **maximum** of one (1) year.
2. An application may be submitted on behalf of applicant **only** if accompanied by a signed authorization letter from applicant.
3. Completed application form **must** be signed and dated.

**ASSESSMENT FEES**

* The fees outlined apply to **EACH** document submitted for review. (Each certificate/diploma/degree.)
* Fees are to be paid in **Bahamian Dollars (BSD)** or **United States Dollar** (**USD) currency** only.
* Fees are **NON-REFUNDABLE** except in the case of overpayment.
* Payment options:
	1. In office, **CASH** payment (BSD or USD only)
	2. **DIRECT DEPOSIT**, to **The National Accreditation & Equivalency Council of The Bahamas, Bank of The Bahamas, Harold Road Branch, Account #122 0000 199**. If paying by direct deposit, **the deposit slip must reference your name**. Attach a copy of your deposit slip to this form.
* Fees are **subject to change**.

**Local Credentials**

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| **Fee Information** | **Local Credentials** |
| Standard 10-days Assessment Fee | $10.00 |
| 5-day Assessment Fee | $20.00 |
| Duplicate Report Fee |  $5.00 (each) |

**\*\*Note: Applicants outside of New Providence are not eligible for the five (5) day assessment option.**

**Foreign Credentials**

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| **Fee Information for documents by Place of Origin** | **Processing Fee****per document** |
| United States | $40.00 |
| Canada, UK, Europe & All Others  | $50.00 |
| Duplicate Report Fee |  $10.00 (each) |

**SUBMISSION OF APPLICATION**

Applications with supporting documents and required fee(s) may be couriered (with pre-paid return delivery) or delivered in person to:

***The National Accreditation and Equivalency***

***Council of The Bahamas (NAECOB)***

**JFK Plaza, John F. Kennedy Drive**

**P.O. Box N-3913**

**Nassau, The Bahamas**

Telephone: 328-8872/3

Fax: 242-328-8995

Email: info@naecob.org

 **SECTION 1**

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| **PERSONAL INFORMATION** |
| **Name**:  (First) (Middle) (Last)  |
| **Maiden Name/Former Name** |
| **Date of Birth**:   (Day/Month/Year) | **Place of Birth:**   (City, Country) |
| **Gender:**  [ ] Male [ ] Female | **Marital Status:**  [ ] Single [ ] Married [ ] Divorced [ ] Widowed  |
| **Address:**  (Street Address) (Postal Address) |
| **Home Phone:** | **Work Phone:** | **Mobile Phone:** |
| **Occupation:** |
| **Employer:** |
| **Email Address:** |
| **TYPE OF IDENTIFICATION**  |
| **Driver’s License #:**  | **National Voters’ ID #:**  |
| **Passport #:** | **Other** (specify): |

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| **APPLICATION TYPE**  | [ ] **Initial Application**  | [ ] **Duplicate Report**  |

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| **PURPOSE OF ASSESSMENT** (Please check all that apply) |
| **Employment**[ ] Public Sector[ ] Private Sector |  **Education** [ ] Public Sector[ ] Private Sector | **Job Advancement**[ ] Public Sector[ ] Private Sector |  **Other** (specify):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

 **SECTION 2**

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| **ACADEMIC QUALIFICATIONS** |
| **DOCUMENT TYPE** (Transcript, Certificate, Diploma, Degree, Other) | **QUALIFICATION**(Name of Course(s), Certificate, Diploma, or Degree…etc.) | **DATE OF AWARD** | **AWARDING INSTITUTION**(Include Physical and Web Address of Institution) |
|  |  |  |  |
| **MODE OF STUDY** (Please check all that apply) |
|  | Full-Time (face-to-face)  |  | Part-Time (online)  |
|  | Part-Time (face-to-face)  |  | Blended Learning (face-to-face and online) |
|  | Full-Time (online)  |  | Other (please specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**What were the General Entry Requirements for the above listed programme(s)?**

* *Minimum Age Requirement:* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* *Academic Qualification:* [ ] High School Diploma [ ] Placement Exam [ ] Other (Please Specify)

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* *Grade Point Average (GPA) on a 4.0 Scale*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **Has any of the listed programme(s) above been previously evaluated?** [ ] YES [ ] NO If **NO,** skip (Section 3) and continue to ‘Statement of Confirmation’. If **YES**, please complete all remaining sections. |

 **SECTION 3**

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| **PRIOR PROGRAMME ASSESSMENT** |
| **Name of Credential Assessment Agency:** |  |
| **Address of Credential Assessment Agency:** |  |
| **Website of Credential Assessment Agency:** |  |
| **DOCUMENT TYPE** (Transcript, Certificate, Diploma, Degree, Other) | **QUALIFICATIONS**(Name of Course(s), Certificate, Diploma, or Degree…etc.) | **DATE CREDENTIALS ASSESSED** (mm/dd/yyyy) |
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**STATEMENT OF CONFIRMATION**

Please indicate the supporting document(s) attached.

* Official Transcript(s)
* Academic Certificate, Diploma or Degree relevant to application
* Certified Photocopy of Certificate, Diploma or Degree relevant to application
* Course syllabus, inclusive of course description for all credentials requesting to be evaluated.
* Portfolio(s) of relevant experience(s) if applicable.
* Assessment Fee
* Cover Page

I confirm that to the best of my knowledge all the information provided in this document is true and accurate. I understand that all documentation filed in support of the application become the property of NAECOB. The documentation will not be copied for or returned to the applicant.

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 **Signature of Applicant Date** (dd/mm/yyyy)

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| **FOR OFFICIAL USE ONLY** |
| Date Received: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Amount Paid: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Receipt #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   | **Evaluation Decision: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** **Signature of NAECOB representative**  **Date (dd/mm/yyyy)** |