

Military Request Form

Next Day _____ at \$120.00 or One Week _____ at \$80.00

Name of the individual being evaluated:

____ Mr. ____ Ms. _____

Birth Date: _____ E-mail Contact: _____

Purpose: ____ Military Recruitment _____

Documents Submitted: _____

The completed evaluation report should be sent to:

Name: _____

Office: _____

Address: _____

Telephone No. _____ E-mail: _____

With submission of a request of a credentials evaluation report, you confirm that the information provided is true and that the documents submitted are exact photocopies of authentic educational credentials that have not been altered in any way subsequent to their issuance. You understand that an evaluation report issued by e-ValReports is advisory in nature and reflects judgment made using various sources of public information and common practice. Your signature also gives educational officials permission to release information for credential verification.

Name: _____

Date: _____

Signature: _____