



**FOREIGN CREDENTIALING FOR CERTIFICATES AND/OR PARAPROFESSIONAL APPROVALS**

NAME OF APPLICANT (Last, First, Middle, Maiden)	IEIN OR SOCIAL SECURITY NUMBER
---	--------------------------------

**Certificate**

- I certify that I have viewed the original evaluation report from an ISBE-approved foreign credentialing service, and the equivalent of a bachelor's degree, 120 semester hours, was earned. A copy of the report was made in this office and is included in this packet.
- I certify that I viewed original foreign transcripts and diplomas, and copies were made in this office and are included in this packet.

\_\_\_\_\_  
*Original Signature of Regional Office Staff*

\_\_\_\_\_  
*Date*

**Paraprofessional Approval**

- I certify that I viewed original documents from an ISBE-approved foreign credentialing service, and the equivalent of an associate's degree was earned. A copy of the report was made in this office and is included in this packet.
- I certify that I have viewed original foreign transcripts and diplomas, and copies were made in this office and are included in this packet.
- A copy of a high school diploma is included in this packet.

\_\_\_\_\_  
*Original Signature of Regional Office Staff*

\_\_\_\_\_  
*Date*