

ASSESSMENT OF ACADEMIC CREDENTIALS APPLICATION GUIDELINES AND FORM

Ref: UCJ/901/1/3

Guidelines for Application

The UCJ requires the following to assess academic credentials:

1. Completed application form signed by the qualification holder. The application form is also available on the UCJ's website, www.uci.org.jm, under the section 'Credential Assessment and Recognition'.
2. Submission of the following supporting documents:
 - a. The original certificate or certified photocopy. Applicants **MUST** provide a certified photocopy of certificates that are oversized, laminated, framed, mounted, tattered, torn or damaged.
 - b. Copies of documents **must** be certified as true and correct by a Justice of the Peace (JP) or Notary Public.
 - c. Certificates in foreign languages must be accompanied by professional, certified English translations. In Jamaica, this should be obtained from UCJ approved translators. Both the certificates in the language of study and the translation must be presented.
 - d. Official transcript(s) from the institution(s) attended. This should be **sent directly** from the institution to the UCJ, addressed to the Executive Director, The University Council of Jamaica, 6B Oxford Road, Kingston 5. A status letter from the institution may be used for the CSME assessment. The transcript may be ordered before submitting the completed application form to the UCJ.
 - e. One form of valid picture identification.
 - f. If the name which appears on the certificate differs from the name on the application and identification, official evidence of change of name must be presented.
3. The application form may be submitted on behalf of the qualification holder.
4. Applications may **NOT** be submitted by fax or e-mail.

Processing Fees

1.	Local Qualification	Foreign Qualification
Application Fee (non-refundable)	\$1,000	\$1,500
10-Day Assessment Service (Partial refund)*	\$2,000	\$3,000
5-Day Assessment Service (Partial refund) *	\$3,000	\$4,000
Extra Copy of Report (at time of application)	\$500	\$500
Duplicate Report (within three years after initial report)*	\$1,000	\$1,500
Additional credential (same institution at time of application)	\$1,000	\$1,500
Reprocess Application	\$1,000	\$1,500

* **CONDITIONS APPLY**

2. Each certificate/diploma/degree received from completed educational programmes is treated as a separate credential.

3. Payment Options: 1. Cash--using the exact amount in Jamaican dollars; 2. Direct deposit to the UCJ's Bank Account at Scotiabank, Oxford Road, Account No. 76716. Deposit receipt **MUST** be forwarded to the UCJ with the name of the applicant; 3. All major local debit and credit cards.
4. A cost of \$25.00 per page will be charged for photocopying more than three pages. Every effort will be made to ensure proper handling of documents. However, the UCJ accepts no liability related to the damage of documents. The UCJ will **NOT** photocopy oversized, framed, mounted, mounted, tattered, torn or damaged documents.
5. Assessment reports will not be released until all fees are paid in full.

Refunds

1. The application fee is NON-REFUNDABLE.
2. The assessment fees are subject to **partial refund of 50%** when completed applications are withdrawn within **FOUR** working days for the 10-day service or within **TWO** working days for the 5-day service.
3. No refunds will be made if an application includes forged, altered, or falsified documents.

Modifications to Assessment Reports

All assessments are based on the best information available to the UCJ at the time of the research. Because education is dynamic, changes occur in all countries from time to time. On this basis, the conclusions for new assessments may be different from previous assessments.

Scope and Limits of Assessment Reports

The UCJ's credential assessment service authenticates documents, conducts research based on well-established methodologies, and then issues an assessment report that makes a general recommendation on the basis of the Jamaican education system. The UCJ does not evaluate course content or make a judgment on the quality of individual credentials.

Expired Applications

Applicants have 12 months to provide all documentation required to complete the process for the initial application, after which it expires. If the initial application expires, applicants who paid the processing fees in full may qualify for a reprocess application. If the processing fees were not paid in full and the initial application expires, applicants must submit a new application and pay the full processing fees.

For more information, please contact

THE UNIVERSITY COUNCIL OF JAMAICA

6B Oxford Road, Kingston 5

Telephone: 876(929-7299/920-1165

Fax: 876 (929-7312

Email: info@ucj.org.jm

Website: www.ucj.org.jm

Incoming Date

Ref: UCJ/901/1/3

FOR OFFICE USE	
Reference No. _____	Due Date: _____

APPLICATION FORM

Before completing this form make sure you read the Guidelines for Application

All applicants should complete both pages of this form. Write in BLOCK capitals

PERSONAL DETAILS			
Name: (First) _____ (Middle) _____ (Last) _____			Home Telephone: _____
Maiden Name/Former Name: _____			Work Telephone: _____
Citizenship: _____			Mobile Telephone: _____
Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	Date of Birth: _____	E-Mail Address: _____	
Mailing Address: _____		Occupation: _____	

TYPE OF ASSESSMENT SERVICE REQUIRED			
<input type="checkbox"/> Assessment of Qualification for CARICOM Skills Certificate (CSME)	<input type="checkbox"/> Local	<input type="checkbox"/> Foreign	
<input type="checkbox"/> Equivalence of Credentials	<input type="checkbox"/> Local	<input type="checkbox"/> Foreign	
<input type="checkbox"/> Recognition of University/Credentials	<input type="checkbox"/> Local	<input type="checkbox"/> Foreign	

APPLICATION TYPE	<input type="checkbox"/> Initial Application	<input type="checkbox"/> Duplicate Report Application	<input type="checkbox"/> Reprocess Application
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PURPOSE OF ASSESSMENT			
<input type="checkbox"/> Further Education	<input type="checkbox"/> Employment	<input type="checkbox"/> Job Advancement	Other (specify): _____
<input type="checkbox"/> Public Institution	<input type="checkbox"/> Public Sector	<input type="checkbox"/> Public Sector	
<input type="checkbox"/> Private Institution	<input type="checkbox"/> Private Sector	<input type="checkbox"/> Private Sector	

TYPE OF IDENTIFICATION	
Driver's Licence No: _____	Passport No: _____
National Voters' ID No: _____	Other Info: _____

CONTACT DETAILS OF PERSON collecting report on behalf of qualification holder (if applicable)	
Name: _____	Telephone: _____
Address: _____	Email: _____

THE INTERVIEWER MAY WRITE ON YOUR APPLICATION FORM

ACADEMIC QUALIFICATION

List all qualifications to be assessed (**Original/Certified Documents Required**). Official transcripts **must be sent directly** from the institution to the UCJ, addressed to the Executive Director, The University Council of Jamaica, 6B Oxford Road, Kingston 5, Jamaica, W. I.

Name of Certificate/ Diploma/Degree	Name of Institution	Country	Date of Award	Period of Study	
				Started	Completed

Qualification(s) used to enter the programme of study from which the award identified above was received:

Mode of Study: Face-to-face Full-time Part-time
 Fully Online Blended Distance with tutorial support

TERMS AND CONDITIONS

- The assessments conducted by the UCJ are advisory and not binding.
- Transcripts received directly from institutions are for use by the UCJ and will not be released to applicants.
- Only authentic original documents will be returned. Certified photocopies will be retained for record purposes.
- Assessment reports are generally prepared within 10 working days and expedited assessments prepared within 5 working days, following receipt of all required information, documentation, and fees. In cases requiring extensive research, the process may take longer and the qualification holder will be informed.
- Applicants are responsible for collecting assessment reports from the UCJ.
- Qualification holders have the right to appeal in writing against assessment results.

By signing this form, I certify that I have read, understand, and agree to the terms and conditions. I also agree that, to the best of my knowledge, all information provided and documents submitted are true and correct.

Name (Print)

Signature

Date

FOR OFFICE USE

FEES Application: _____ 10-Day Assessment: _____ 5-Day Assessment: _____ Extra Copy with Report: _____ Additional Credential: _____ Balance Due: _____ Receipt No.: _____ Date: _____	COMMENTS 	Documents Received: <input type="checkbox"/> Certificate <input type="checkbox"/> Transcript <input type="checkbox"/> Valid ID <input type="checkbox"/> Other _____ _____ _____ _____
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