



**INTERNATIONAL SEARCH REQUEST FORM
EDUCATION VERIFICATION**

Company Name: _____ **Account ID:** _____
Contact Name: _____ **Phone Number:** _____
Email: _____

Please provide the following information and email to International@intellincorp.net or fax to 216-450-5233. All fields above and below must be completed in order for your request to be submitted.

Country/Location to Search: _____

Full and Precise Name of Applicant:

| First Name | Middle Name | Last Name |
|------------|-------------|-----------|
|------------|-------------|-----------|

Applicant's Date of Birth: _____

Applicants SSN: _____

Government ID# (Note: This is not SSN): _____

Passport #: _____ Country of Origin: _____

Mother's Maiden Name: _____

International Education Verification Specific:

School Name: _____

School Address: _____

(Note: PO Box numbers are not applicable)

City: _____ **Country:** _____

Name of Degree Claimed: _____

Attendance Start and End Dates: Start date: _____ End date: _____

*****Additional requirements**

- **A signed release and copy of diploma are required.**
- **A copy of the Statement of Marks (transcripts) is required for India Education requests.**
- **The signed releases must be signed in English and country specific characters if applicable.**
- **Fields in red are mandatory.**