

Application for assessment of foreign qualifications

*Fields marked * are required.*

1. Personal details

Danish civil registry no. * (if none: date of birth)

First and middle names *

Family name *

Previous name (if your name has changed since the documents were issued)

Nationality *

Street address *

Any other address information (e.g. c/o name)

Postal code *

City/town *

Country (if not Denmark) *

Telephone

Email *

2. Purpose of the assessment

What is the main purpose for which you want to use the assessment? *

Tick 1 box only. NB: The assessment will be the same no matter what you answer here.

- ☐ Job
- ☐ Admission to an unemployment fund
- ☐ Education
- ☐ Other

If Job: In which field of work? _____

If Education: Which education? _____

Please ask the educational institution whether you fulfil the grade and subject level requirements.

If Other: Which purpose? _____

Have you had your qualification assessed before? *

☐ Yes

☐ No

If Yes: Please enclose copy of prior assessment(s).

Do you need the assessment in Danish or English? *

You can only get the assessment in one language. An assessment in Danish is easier to use in the Danish labour market and in the Danish education system.

☐ Danish

☐ English

3. Basic compulsory school

Education until the age of 15-16 years

Qualification (final part of basic school) *

School *

City *

Country *

What year did you begin primary education? *

What year did you complete lower secondary education? *

4. Upper secondary education

General education following basic school and giving access to higher education

Name of qualification according to certificate *

Name of educational institution *

City/town *

Country *

Web address of institution

What year did you start the education? *

What year did you finish the education? *

What was the official length of the education (years and months)? *

5. Vocational education and training

Education aimed at a specific trade/industry and not requiring upper secondary school

Name of qualification according to certificate *

Specialisation/main fields of study

Name of educational institution *

Web address of institution

City/town *

Country *

What month and year did you start the education? *

What month and year did you finish the education? *

Was it full-time or part-time education? *

☐ Full-time

☐ Part-time

What was the official length of the education (years and months)? *

Did the programme include practical training in a workplace? *

☐ Yes

☐ No

If Yes:

Workplace: _____

Duration in months: _____

Which types of job can you do with this qualification?

Additional information about the qualification

6.1. Higher education 1

Education that normally requires an upper secondary qualification or above

Name of qualification according to certificate *

Specialisation/main fields of study

Name of educational institution *

Web address of institution

City/town *

Country *

What month and year did you start the education? *

What month and year did you finish the education? *

Was it full-time or part-time education? *

☐ Full-time

☐ Part-time

What was the official length of the education (years and months)? *

Did the programme include practical training in a workplace? *

☐ Yes

☐ No

If Yes:

Workplace: _____

Duration in months: _____

Did you finish the programme with a thesis, dissertation or other large project? *

☐ Yes

☐ No

If Yes:

Title: _____

What was the nominal duration of this work in months? _____

Credits earned, if applicable (e.g. number of ECTS): _____

Which types of job can you do with this qualification?

Additional information about the qualification

6.2. Higher education 2

Name of qualification according to certificate *

Specialisation/main fields of study

Name of educational institution *

Web address of institution

City/town *

Country *

What month and year did you start the education? *

What month and year did you finish the education? *

Was it full-time or part-time education? *

☐ Full-time

☐ Part-time

What was the official length of the education (years and months)? *

Did the programme include practical training in a workplace? *

☐ Yes

☐ No

If Yes:

Workplace: _____

Duration in months: _____

Did you finish the programme with a thesis, dissertation or other large project? *

☐ Yes

☐ No

If Yes:

Title: _____

What was the nominal duration of this work in months? _____

Credits earned, if applicable (e.g. number of ECTS): _____

Which types of job can you do with this qualification?

Additional information about the qualification

6.3. Higher education 3

Name of qualification according to certificate *

Specialisation/main fields of study

Name of educational institution *

Web address of institution

City/town *

Country *

What month and year did you start the education? *

What month and year did you finish the education? *

Was it full-time or part-time education? *

☐ Full-time

☐ Part-time

What was the official length of the education (years and months)? *

Did the programme include practical training in a workplace? *

☐ Yes

☐ No

If Yes:

Workplace: _____

Duration in months: _____

Did you finish the programme with a thesis, dissertation or other large project? *

☐ Yes

☐ No

If Yes:

Title: _____

What was the nominal duration of this work in months? _____

Credits earned, if applicable (e.g. number of ECTS): _____

Which types of job can you do with this qualification?

Additional information about the qualification

7. Work experience based on your qualifications

For each period of employment, please mention period (from ... – to ...), job, workplace and country.

8. Additional information

NB: Do not give any sensitive personal information

9. Contact to institutions or authorities

Can the Danish Agency for Higher Education and Science contact relevant educational institutions and authorities in the country where you obtained your qualifications? *

☐ Yes

☐ No

If No: Why not?

10. Body submitting the application, if applicable

Only fill in if the application is submitted by an authority, unemployment fund, institution, company or organisation.

Authority/unemployment fund/institution/company/organisation

Contact person

Street address

Postal code

City/town

Telephone

Email *

Is the contact person to receive a copy of the assessment?

☐ Yes

☐ No

11. Signature of the holder of the qualification

I certify that the information given in this application is correct and that the enclosures are authentic documents relating to me. I understand that submission of fraudulent documentation will be reported to the police.

I hereby consent to the Danish Agency for Higher Education and Science assessing my qualifications.

Date * _____ **Place *** _____

Signature *
