

**ENVIRONMENTAL HEALTH SPECIALIST  
APPLICATION FOR TRANSCRIPT EVALUATION**

**INSTRUCTIONS**

In order for your transcripts to be evaluated for the Environmental Health Specialist program you must fill in this application, submit official college transcripts, and submit a non-refundable fee of \$245.25 to: CPS HR Consulting, Attn: EHS Transcript Evaluation, 241 Lathrop Way, Sacramento, CA 95815.

1. **Review application instructions** including the educational requirements for basic science units available at <http://www.cps.ca.gov/TakeATest/EnvHealth/>. You may submit your transcripts for evaluation before meeting all the requirements, but the fee is non-refundable and does not depend on the outcome of the evaluation. Subsequent evaluations for additional courses completed are processed at no additional charge.
2. **Send completed application along with a cashier's check, money order, or credit card payment** in the amount of \$245.25 (no personal checks accepted) to the address above.
3. **Submit official college transcripts to CPS** from all schools attended where you took science or math courses and completed your Bachelor's degree. Please list all of these schools below. You must mail the transcripts in its sealed envelope and may send it along with your application, or have the college mail them to CPS directly (address above).
4. You can view the status of your transcript evaluation by logging on to our website at: <http://www.cps.ca.gov/TakeATest/EHStranscript/>. A login and password will be sent to the email address submitted in this application.

**Personal Information**

Name – Last	First	MI	<input type="checkbox"/> Ms. <input type="checkbox"/> Mrs. <input type="checkbox"/> Mr.
Previous Names Used (listed on any transcripts):			
Address	City	State	Zip
Telephone – Home	Work/Mobile	Email Address (this will be used to set-up your online account)	
(    )	(    )		

**Education**

Name of College or University	City, State	Major Course of Study	From	To	Degree	Year Completed

\_\_\_\_\_ Signature \_\_\_\_\_ Date

**Paying by credit card?**

Credit Card Type:    Visa     MasterCard

Name on Credit Card: \_\_\_\_\_

Credit Card #: \_\_\_\_\_

Expiration Date: \_\_\_\_\_    Three Digit Security Code (back of card): \_\_\_\_\_