



**EMBASSY OF THE STATE OF KUWAIT  
CULTURAL DIVISION**

3500 INTERNATIONAL DRIVE, N.W., WASHINGTON, D.C. 20008 TELEPHONE: (202) 364-2100 FAX: (202) 363-8394/ (202) 362-4379

**TRANSCRIPT/INFORMATION RELEASE FORM**

Date: \_\_\_\_\_

University: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Dear Sir/Madam:

This is to authorize release of my official transcript and any other information pertaining to my enrollment to:

Attn: Authentication Department  
Cultural Division - Embassy of the State of Kuwait  
3500 International Drive NW  
Washington, DC 20008

Please **include a verification letter** with the following information:

- a. Did the student take any courses through non-traditional format (i.e. online/distance education/independent study/ special topics/satellite campus etc)?
- b. If any courses were taken through non-traditional format, please provide the name of the course and corresponding credits.
- c. Do any of the non-traditional courses apply towards student's degree? If yes, please indicate which course.
- d. Please provide the student's **start date into the degree program.**

My complete name as it appears on your record is \_\_\_\_\_.

My date of birth is \_\_\_\_\_.

My Social Security # or University ID# is \_\_\_\_\_.

My dates of attendance were from \_\_\_\_\_ to \_\_\_\_\_.

Signature of Student: \_\_\_\_\_