



**EMBASSY OF THE STATE OF KUWAIT  
KUWAIT UNIVERSITY OFFICE**

3500 International Drive, N.W., Washington, D.C. 20008  
Telephone (202) 364-2100 FAX (202) 537-3253/(202) 363-8394

**ANNUAL TICKET ALLOWANCE**

**STUDENT INFORMATION** (To be completed by ALL students)

<b>Student's Name</b>	<b>University</b>
<b>Major</b>	<b>Degree</b>

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

Phone #: \_\_\_\_\_ E-mail: \_\_\_\_\_

**Travel Date(s):** \_\_\_\_\_

**Name of Spouse:** \_\_\_\_\_

<b>Child/Children</b>	<b>Date of Birth</b>
_____	_____
_____	_____
_____	_____
_____	_____

**I'm requesting a:**

- Annual Ticket Allowance**
- Field Trip Ticket Allowance**
- Final One Way Ticket Allowance**

This is to certify that I have read the Kuwait University Scholarship Regulations regarding the ticket allowance and understand that I am officially requesting my annual ticket allowance to be released.

\_\_\_\_\_  
**Student's Signature**

\_\_\_\_\_  
**Date**