EMBASSY OF THE STATE OF KUWAIT
CULTURAL DIVISION
2111 Wilson Blvd, Suite 500, Arlington, VA 22201 Telephone: (202) 364-2100 Fax: (202) 363-8394/ (202) 362-4379

SUMMARY OF ACADEMIC HISTORY

Student Name: _____

Civil ID: _____

Date of High School Graduation: _____

High School Institution: _____

Please indicate all colleges/universities attended immediately after high school graduation in chronological order (by date).

SEMESTER OR TERM	YEAR	NAME OF SCHOOL	TOTAL CREDITS EARNED	ENROLLED FULL-TIME (√)	NOT ENROLLED (√)