Consulate General of the State of Kuwait Kuwait Cultural Office Los Angeles



القنصلية العامة لدولة الكويت المكتب الثقافي الكويتي لوس أنجلوس

SCHOLARSHIP APPLICATION DATA SHEET

Name: (Copy from Passport. Indicate	othor c	———	ag of name, if an	y by the School	
School:		-	ig of flatfie, if at	ly, by the school	n.,
Date of Birth (MM/DD/YY)			Place of Bir	th:	
Passport No.:		_	Civil ID No.	•	
Date Issued (MM/DD/YY)					
Height:		_		lbs.	
Permanent Address:		_	Tel. No:		
Father's Name:					
Occupation:					
Mother's Name:					
Occupation:					
Number of Brothers:			Number of Sisters:		
For Married Students ONLY:					
Spouse's Name:					
Children's Names and Ages:					
Name	Age		Name		Age
If spouse has a separate passport, Pa	ssport N	_			
Date Issued (MM/DD/YY):		_Pla	ce of Issue:		<u>.</u>
Check one: Family will accompany me Family will follow later Family will remain in Kuwait					
Check Program: Ministry of Education Civil Service Private Other			Stud	vait University dy Leave with pa dy Leave withou	•

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What do y	ou plan to study	(Major)?	
Degree Le	vel:		
When do y	you plan to start	English?	
When do y	you plan to start	Academic work?	
Period for	which scholarshi	p is requested: From To	
Secondary	y Schools:		
From	To	Name of School Track: Art / Science	ce (Choose)
Colleges/U	Universities atter	ded:	
From 	To	Name of School	
in England If Yes, who In your pro	l) Yes en and where? evious schooling,	you have any other opportunity to practice E No were any subjects taught in English?	YesNo
Signature		Date	
Please do	not write below	this line.	
Date Rece			
	S. Arrival (I-94)		
Type of Vi			
	nguage School		
Regular Pr	rogram School		
Local Prog	gram School		
ID Numbe	r		
004.0		Who floor Los Arreles CA LICA 00017 Dhares 210	746 4700 500 310 700 4456