Request for Academic Records

Note to Applicant: This form is available for you to request to have your academic records forwarded to KAUST. Please complete the top portion of this form and then submit it to your institution's registrar/controller of examinations (or other office responsible for student records). If you attended multiple schools, fill out one form per school and send a form to each of them. Please note that some institutions require a fee for this service, so please check with your school prior to sending the form.

Last/Family Name			
First/Given Name			
Previous Name (if applicable)			
Date of Birth Email	address		
Institution Name			
Dates Attended (From)	(To)		
Degree Name (if applicable)			
Year of Award (if applicable)	Major		
Student ID or Roll Number at institution	(if applicable)		
I hereby authorize the release of my acad	lemic records to King Abdullah University of	Science &	
Technology. Signature:	Da	te:	
records/statement of marks – showing all to be released to King Abdullah Universi complete official transcript/statement of	named person seeks to have his/her transcript subjects completed and all grades/marks aways of Science & Technology. Please complete of marks to KAUST at the address listed below	arded for all years of study – this form and return with a ow.	
	Email		
Phone Number			
I confirm that the student named abov	e attended	(institution)	
Degree obtained (if applicable)			
Authorized signature:	D	Date:	

Mail to: Office of Admissions, Student Affairs - Building 18, Suite. 3222, 4700 King Abdullah University of Science and Technology, Thuwal 23955-6900, Kingdom of Saudi Arabia