



Application Form

Incoming Exchange Student

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STUDENT INFORMATION

Student Name:			Home Institution:		
Gender:	<input type="checkbox"/> Male	<input type="checkbox"/> Female	Study Level:	<input type="checkbox"/> Graduate	<input type="checkbox"/> Undergraduate
Nationality:			Major:		
			GPA:		
Date of Birth:	Month	Day	Year		
City of Birth:			Country of Birth:		
Passport No.:			Expiration Date of Passport:	(validity ≥ 2 year)	
Address:					
Contact/Code Tel:			Email:		
Level of Study (CBA):	<input type="checkbox"/> 1 st year	<input type="checkbox"/> 2 nd year	<input type="checkbox"/> 3 rd year	<input type="checkbox"/> 4 th year	<input type="checkbox"/> 5 th year
Current Semester:			Academic Year:		
Semester (CBA):	<input type="checkbox"/> Fall	<input type="checkbox"/> Spring	Year:		
Proof of English Fluency:			(TOEFL – IELTS – SAT – GMAT)	Score:	
Contact for Emergency			Name:		

Student Signature: _____
& Date

Director Signature: _____
& Date

BUSINESS COURSES TO STUDY AT THE COLLEGE OF BUSINESS ADMINISTRATION, KUWAIT UNIVERSITY

#	Code	Course Title
1.		
2.		
3.		
4.		
5.		
6.		

Then add (3) more as back-up plan courses in case any changes occur before the class start

#	Code	Course Title
1.		
2.		
3.		