



## Authorization to Release Academic Record

I, \_\_\_\_\_ whose signature hereunder authorize the Cultural Counselor to the Embassy of the Kingdom of Bahrain in Washington DC to check with the University/ College concerned the authenticity of my document (s) that (a) copy (ies) is/are enclosed.

Yours Sincerely,

\_\_\_\_\_  
(Signature)

DATE:  
\_\_\_\_\_

Student ID #: \_\_\_\_\_

Student DOB: \_\_\_\_\_  
Month/Day/Year

Social Security #: \_\_\_\_\_