

Student Consent and Authorization Form

Documents Required:

- Academic Reports Transcripts
- Authenticity of Graduation Certificates or Transcripts Others

Academic Details:

Country:

Student Full Name:
(P.S. Write the name as mentioned in the certificate)

Passport Number: Date of Birth:

College / University:

Student Enrollment Number:

Academic Degree:

Academic Program:

Start Date From: / / To / /

Date of Graduation: / /

Contact Info:

Email address: Telephone Number:

I,
whose signature here under, I hereby give my consent to the Cultural Office of the
Embassy of the Kingdom of Bahrain in (Mention the city)
to check / reveal any further inquiries with the university / college shown above
concerned the authenticity of my document/s or any issues related to my academic
studies.

Student Full Name:

Student Signature: Date:

For the above request:

- Fees required and paid to university No fees required