

Scholarship Application Form for New AUK Freshman Applicants Only 2018-2019

FOR OFFICE OF ADMISSIONS USE ONLY APPLICATION DEADLINE: 22-August-2019

Student ID Number:		
PERSONAL INFORMATION:		
1. Full Name: (Mr./Ms.):	y) First	Middle
2. Date of Birth (dd/mm/year):		er: Male Female
4. Residential Address Information:		
Kuwait Address:	International Address:	
Block Street		
House/Building # Apt #	P.O. Box	
Area/District	City, Postal Code	
5. Telephone Number(s): Home: ()	Country Mobile: ()
6. E-mail: Area Code	Area Code	
APPLICANT TYPE:		
7. Have you already applied to the American University of Kuwait?		□ No
If yes, have you received an offer of admiss	ion?	□ No
8. Are you planning to apply for the Kuwait Government Scholarship? Yes No		□ No
ACADEMIC INFORMATION:		
9. Please enter the name of the high school from	om which you are graduating or have gra	aduated:
School Name:	Graduatio	n Date:
10. Please enter the name and phone number	f your high school guidance counselor	or principal:
Name:	Telephone	e:
11. High School Grade Point Average (GPA):		

12. Class Rank:	out of	students (if applicable)
13. SAT I Scores (if applicable): Verb	pal:	Math:
14: TOEFL Score(s):		
ADDITIONAL INFORM		1 112 1 1
ADDITIONAL INFORM	ATION: (You may att	each additional sheets if necessary)
15. Describe what you consider to be	be your most significant acad	emic achievements.
16. What extra-curricular activities I (You can include employment positions in		were most important to you, and why?
17. What are you interested in study (You can include more than one field in you	•	nis field interest you?
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This application form must be submit above.	tted to the Office of Admissi	ons by the application deadline mentioned
Decisions regarding scholarship awar	rds are final.	
I hereby certify that I have personally	completed this application a	and the information is complete and accurate.
Applicant's Signature		Date
Civil ID Number		
CIVII ID INGILIDO		