



APPLICATION FORM FOR ACADEMIC MISSION

Kuwait University
 Vice President for Academic Affairs
 Cultural Relations Department

Date:
 No:

College:		Department:	
Full Name:		Nationality:	Present Position:
Civil ID No:		University ID No:	
Place of Mission:		Contract End Date:	
Date of Activity: From: _____ to: _____		Participating: <input type="checkbox"/> Full period <input type="checkbox"/> From: _____ to: _____	
Title of Paper:			
Activity Website:			
Last Mission Report: <input type="checkbox"/> Yes <input type="checkbox"/> No		Purpose of Mission:	
Mission Expenses:		Expenses borne by host:	
1. Full Salary + Allowance <input type="checkbox"/>		None <input type="checkbox"/>	Attendance only <input type="checkbox"/>
2. Full Salary Leave Only <input type="checkbox"/>		All Expenses <input type="checkbox"/>	Present a paper <input type="checkbox"/>
		Air ticket only <input type="checkbox"/>	Others, specify <input type="checkbox"/>
		Accommodation only <input type="checkbox"/>	
Signature: _____		Date: _____	
Dept. Chair's Recommendation:			
		Signature: _____	Date: _____
Dean's Recommendation:			
		Signature: _____	Date: _____
Cultural Relations Department:			
		Signature: _____	Date: _____
No. of academic missions for the applicant ()		College ()	Department ()
President's Approval:			
		Signature: _____	Date: _____

*This application form should be submitted to cultural relations dept. with the necessary documents (invitation including the exact date & location of the mission, acceptance of the paper, and the report of the last mission) at least four weeks before the actual time of the mission.