



Embassy of The Arab Republic Of **Egypt**
Cultural and Educational Bureau

STUDENTS INFORMATION SHEET

PERSONAL INFORMATION:

Name: _____
Date of Birth: _____ Marital Status: _____
Home Address: _____
Phone: _____ Email Address: _____

ACADEMIC INFORMATION:

Type of Mission:
General Mission () Joint Supervision () Internal Mission ()
Sabbatical () Self Finance () Study Leave ()
Special Scholarship () Others: _____

Sponsor: _____
Major: _____
Minor: _____
Specilazation: _____
Goal: _____ Egyptian Advisor's Name: _____

Expecting Date of arrival to USA: _____
Date expected to start studies: _____
Type of Visa: _____ Expiration Date of Visa: _____
Passport Number: _____

Name of US University: _____
Address: _____

Name of US Advisor: _____
Phone Number: _____ Fax: _____
Email Address: _____

برجاء استكمال كل البيانات باللغة الانجليزية و إرسالها بالفاكس أو البريد الإلكتروني