

Royal Embassy of Saudi Arabia
in the Netherlands
Cultural Mission
The Hague



سفارة المملكة العربية السعودية
في مملكة هولندا
الملحقية الثقافية

DEGREE VERIFICATION FORM

APPLICANT/EMPLOYEE:

<input type="text"/>	<input type="text"/>	<input type="text"/>
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Last Name

First Name

Middle Name

(provide name as it appears on National Card)

<input type="text"/>	<input type="text"/>
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other names you have used, including maiden name

Student I.D while in University

<input type="text"/>	<input type="text"/>
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Date of Birth

Phone number

Male Female

EDUCATION INFORMATION:

Degrees	Name of institute	Date of Enter	Date of graduation	Country
BA				
MA				
Ph.D.				

The table must filled completely if you have a Ph.D. degree. Also a copy of all diplomas must be provided

I hereby consent at any time during my application process, to obtain an investigative report on my educational background. I give consent to allow a representative of the Saudi Cultural Mission to the Netherlands to the institution indicated above. I do hereby release all agents, servants, and employees of the university, from all liability resulting from the release of this information. I certify that the statements made by me on this form are true, complete, and correct to the best of my knowledge and belief and are made in good faith. I understand that falsification of any information on this form will void my application for employment and or employment actions based on it.

Applicant Signature: _____ **Date:** _____