Kuwait University	College:
Deanship of Admission and	Scientific Section:
Registration Department	Summer Semester
	Form submission date:
Participation form for Lan	guage Instructor for summer semester
New form	Amendment of previous Formo
FIRST: Course Information	
C 1 2 3	
Course Name	
Course No.	
Section No.	
Time	
Units	
Notes	
SECOND: Faculty Member inform	mation
Full Name:	
Job ID.: Jo	b Title:
Nationality:	••••
Residency expiry date: (non-Kuw contract)	raiti) (attach copy of residency
THIRD: Semester which the Facu submitted	· ·

FOURTH: Attach all out of the university secondment decisions or sabbatical leaves for members that fulfill the conditions for the summer semester academic year.

FIFTH: Attach all appointed leadership positions.

Signature of Faculty Member
Signature and seal of the Head of Department
Signature and seal of the College Dean

- \* Submitting this form to the Deanship of Admission and Registration with the completed data, signed from the College Dean, Head of Department after the acknowledgement from the College that the Supportive Academic Staff Member fulfills all the conditions with accordance to the amended summer semester regulations on date 05/04/2017 and under its responsibility.
- \* In the event the form is being amended from previous form, a copy of previous forms must be attached for the concerned faculty member.