

**Distance Learning Form**

Name of the Student: \_\_\_\_\_

Degree: \_\_\_\_\_ Major: \_\_\_\_\_

Confer Date: \_\_\_\_\_

1. Did the Student earn their degree entirely through traditional, face-to-face coursework\*?  Yes  No
2. Was coursework completed only on the main campus\*\*?  Yes  No

\*If not, did the student complete any coursework through distance/online, hybrid, web-based, web-enhanced, or web-enabled classes? If so, please list the courses in the chart below.

Course Title	# of Credit Hours	*Course Type	% of Course Completed Online			
			(25%	50%	75%	100% )

\*\*If the student did not study on the main campus, please clarify:

**University Point-Of-Contact Information**

Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_

## Application for the Authentication of Documents

Name of the applicant: \_\_\_\_\_

Name of the employer: \_\_\_\_\_

Name of the passport agency (if applicable): \_\_\_\_\_

### Required Documents:

1. Applicant contact information that includes an address, email and phone number AND/OR the passport agency's address, email and phone number.
2. Letter from the applicant or the courier agent stating the reason for authentication
3. Copy of the employment contract
4. Copy of passport
5. Copy of college/university degree
6. Updated official transcript in a sealed envelope.
7. Signed authorization letter (attached) from the applicant allowing the Saudi Arabian Cultural Mission to obtain information about his/her academic record
8. Verification from the National Student Clearinghouse. Receive this verification by visiting [www.degreeverify.com](http://www.degreeverify.com) and provide the degree information. If this information is verified, print out a copy using the "transaction ID number."
  - If the college/university does not participate in the National Student Clearinghouse, please contact the college's registrar office for a degree verification letter. This letter must be in a sealed envelope.
9. The attached distance learning form filled out by the university and sent in a sealed envelope from the registrar's office. If the university is unwilling to provide this information on the form, a letter in a sealed envelope from the university addressing the information on the attached form will suffice. This may come in the same envelope as the transcripts.
10. Nurses and physicians are required to provide us with a copy of their practice license and the email and telephone number of the clinic for confirmation of the validity of the license.
11. A prepaid return envelope from the United States Postal Service, FedEx, or DHL. **Your documents cannot be returned to you without this requirement.**

Important note: Incomplete files will be immediately returned. If there is no contact information, the documents will be discarded after 2 weeks. Please send all documents to:

Saudi Arabian Cultural Mission  
Attn: Authentications Department  
8500 Hilltop Road  
Fairfax, VA 22031

For more information, please contact:

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