

TO WHOM IT MAY CONCERN

This is to certify that I, _____
give the authority to the Cultural Section – Embassy of the United Arab Emirates in Canberra / Australia to have full access to my academic information, including: Enrollments, Transcripts, Academic Status, Attendance and any other necessary details that may be required.

This information should be forwarded to the following address:

**Cultural Section
UAE Embassy
PO Box 5158, GARRAN,
ACT 2605, AUSTRALIA**

**Tel. +61 2 6286 8333
Fax +61 2 6286 8162**

Email: office@uaeculture.org.au

Name: _____

Signature: _____

Date: _____