

To Whom It May Concern:

In order to authenticate a given student’s compliance with the parameters of the Ministry of Higher Education’s (MOHE) program, SACM requests your assistance in establishing the nature and content of the student’s completed coursework.

SACM appreciates your cooperation in filling out and sealing this form. Please include your contact information with the sealed document and send to the address below.

American Passport & Visa International
 c/o (Applicant Full Name)
 1990 K St NW, Suite 450
 Washington, DC 20006
 1(800)766-0452

Online Course Form

Name of the Student: _____

Degree: _____ Major: _____

1. Did the Student earn their degree entirely through regular 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: