

<Appendix >



SEOUL NATIONAL UNIVERSITY
**APPLICATION FOR
『SNU PRESIDENT FELLOWSHIP』
FALL 2017**

- Please type or print in English or Korean. This form is four pages in length.

COLLEGE / DEPARTMENT

Please specify the names of college or school, and major which you belong to at SNU (Doctoral Program).

College _____ Major _____

Admission Application Number (newly admitted students only) _____

PERSONAL INFORMATION

Name _____
Family / Last Given / First Middle (if any)

Salutation ☐ Mr. ☐ Ms.

Korean Name _____

Passport Number _____

Resident Registration Number _____

Nationality _____

Date of Acquisition of your Nationality (YYYY.MM.DD.) _____

Place of Birth _____

Date of Birth (YYYY.MM.DD.) _____

Mailing Address Korea _____
Permanent Residence _____

E-mail _____

Telephone Korea _____
Permanent Residence _____

Cell Phone _____

Marital Status ☐ Single ☐ Married ☐ Other

For married students only

	Name	Date of Birth
Spouse		
Children		

Do you plan to live with your family for the duration of your educational program?

☐ Yes (How long? _____)

☐ No

RESIDENCE INFORMATION (Newly admitted students ONLY)

Do you plan to live on campus dormitory
(BK International house)?

☐ Yes

☐ No

If YES, please check type of room

☐ Studio room (single/married couple only)

☐ Family room (family of your spouse and children)

EDUCATION INFORMATION

UNDERGRADUATE (Bachelor's Degree)

University Name

Website

Major

GPA

_____ out of _____

Dates Attended

From _____ to _____ (YYYY.MM.DD)

GRADUATE (Master's Degree)

University Name

Website

Major

GPA

_____ out of _____

Dates Attended

From _____ to _____ (YYYY.MM.DD)

WORK EXPERIENCE (as a faculty at a university)

University Name

Department

Title

Courses you teach

Period of Employment

_____ months (From _____ to _____)

Reference

Reference's Email

ATTESTATION

I, _____, certify and agree that all the information provided in all parts of the application and any and all other attached documents are true and valid. I give the 『SNU President Fellowship』 Selection Committee and affiliated bodies all rights to verify any information I have in this application. I am aware that any omissions, falsifications, misstatements, or misrepresentations above may disqualify me for the scholarship.

Printed Name :

Signature :

Date :

A Statement of the Applicant's Study Plan

Please describe in detail what you plan to study and why you want to pursue your education at SNU. (More than 1 page)

