

Program Application Form

Personal Information

Name	First Name		Last Name	
Date of Birth			Passport Number	
Country of Citizenship	Republic of Korea		Issuing Country	Korea

Address of Participant

Address		City	
Province		Country	
Phone / FAX			

Fill out only if younger than 21 years of age

Father/Guardian	Name		ID Number: _____
Mather/Guardian	Name		ID Number: _____

Registration

Desired Starting Date	Year		Month / Day
	<input type="checkbox"/> Spring Term(January)		<input type="checkbox"/> Fall Term(August)
Academic Status(Mark with an "■")		<input type="checkbox"/> Freshman	<input type="checkbox"/> Transfer

PERSONAL OBJECTIVES (Please describe)

How did you get this brochure?(Name of institution, etc.)

Academic Objectives

1. Intended Fields of Study or Majors of Interest:

1. _____ 2. _____
 3. _____ 4. _____

2. Do you have a specific institution in mind? (Placement at these institutions is not guaranteed)

1. _____ 2. _____
 3. _____ 4. _____

3. Do you have a preferred U.S. city or state? (Placement at these destinations is not guaranteed)

1. _____ 2. _____
 3. _____ 4. _____

ABOUT YOUR FORMER EDUCATIONAL BACKGROUND

1. High School information:

High School Name			
Graduation Date(or expected)	(day)/	(month)/	(year)/
Grade Point Average(Final or Cumulative)			
Maximum Possible Grade		Passing Grade	

2. University Information (if attended):

Institution Name			
Fields of Study			
Graduation Date(or expected)	(day)/	(month)/	(year)/
Grade Point Average(Final or Cumulative)			
Maximum Possible Grade		Passing Grade	

3. Test Score:

TOEFL Score	Date		Score	
SAT Score	Date		Score	
ACT Score	Date		Score	