

**Exchange Student Program Application Form**

· Please fill out the form by computer typing in CAPITAL LETTERS IN ENGLISH

· Application form cannot be edited after submission. Please review it carefully

**1. Program (Please check ‘√’)**

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| Start of Semester | **2019 Spring (March ~ June)** | \* Photograph attached |
| Stay of Study | ( ) 1 semester  ( ) 2 semesters until 2019 Fall |

**2. Personnel Information**

|  |  |
| --- | --- |
| Surname | (as appears in Passport in English) |
| Given Name(s) | (as appears in Passport in English) |
| Nationality | (as appears in Passport in English) |
| Passport Number |  |
| Date of Birth | (YYYY/MM/DD) |
| Korean Name | (write down if you have in Korean, otherwise we will make your Korean Name)  **\* 한국어 이름이 있으면 한국어로 꼭 써 주세요!** |
| Gender | ( ) Male ( ) Female \* Please check ‘√’ |
| Telephone | (country code-area code-number) |
| Email Address |  |
| Mobile Number | (country code-area code-number) |
| Emergency  Contact Number | (country code-area code-number) |

**3. Academic Background**



|  |  |
| --- | --- |
| Name of Home University |  |
| Current Year | ( ) Year 1 ( ) Year 2 ( ) Year 3 ( ) Year 4 |
| Name of Major |  |

**4. Home University**

|  |  |
| --- | --- |
| Name of International Office’s Manager |  |
| Manager’s email address |  |
| Manager’s  Mailing address |  |
| Manager’s Office Number | (country code-area code-number) |

**5. Language Proficiency (Please check ‘√’)**

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| --- |
| Which language do you wish to study at GU? ( ) Korean ( ) English |
| Are you fluent in either Korean or English to follow lectures and complete course assignments? ( ) Yes ( ) No |
| Have you taken any Korean Language Course before? ( ) Yes ( ) No |
| Do you wish to take Korean Language Course in GU? ( ) Yes ( ) No |

**6. Declaration (Please read and check ‘√’)**

|  |
| --- |
| I declare that the information submitted in this application is true and correct. I authorize the University to obtain information from any educational institution previously or currently attended by me. If any information supplied by me is considered to be untrue, incomplete or misleading in any respect, I understand the University may take such action including the disclosure of the information to any person or body. I understand the University reserves the right to vary of reverse any decision made on the basis of untrue, incomplete or misleading information.  I agree that Gachon University may collect my personal information shown above for the following purposes:  - Administration purposes for the exchange/visiting program and scholarships  - Statistical and research purposes by the Office of International Affairs, Gachon University  **\* I have read the declaration and agree. ( ) Yes ( ) No** |