**#1**

**Application Form for Admission and Transfer for Overseas Koreans and Foreigners**

※ Korean citizens residing in Korea may not use this form.

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Year** | |  | | | | | **Photo**  **(within 3 months)**  **3x4cm or passport photo** | | |  | |
| **Application Number** | |  | | | | |
| **Graduate School** | |  | | | | |
| **Course** | | Master’s / Doctorate | | | | |
| **Qualifications** | | **Overseas Koreans and Foreigners** | | | | | | | | | |
| General ( ) | | | | | Inter Disciplinary Cooperation ( ) | | | | |
| **Department** | |  | | | **Major** | |  | | | | |
| **Name** | **Korean** | ※ write in Korean as pronounced. | | | **Nationality** | |  | | | | |
| **Chinese Character** | ※ Applicants from countries where  chinese characters are not used  should leave this blank. | | | **Alien Registration Number** | | -  ※ In the absence of alien registgration  number, write date, month and year of birth. | | | | |
| **English** | ※ Should be written in the order of  Family name, name | | | **Phone** | | Home | | |  | |
| Mobile | | |  | |
| **Present Address** | | Zip Code: | | |  | | | | | | |
| **E-mail** | |  | | | | | | | | | |
| **Schools**  **Attended** | | **Name of the School** | **Department**  **(Major)** | | | **Period**  **(From – To)** | | | **Graduation**  **(Expected) date** | | **Registration No. of Degree** |
| Bachelor’s Degree | |  |  | | |  | | |  | |  |
| Master’s Degree | |  |  | | |  | | |  | |  |
| **Overseas School**  **※ Applicable to those whose final education was at overseas universities.** | | **Address** |  | | | | | | | | |
| **Tel** |  | | | | | **Fax** | |  | |
| **Name of the**  **Department in charge**  **of Academic Record** | |  | | | | **E-mail Address**  **Of the person**  **in charge** | |  | |
| **Guarantor** | | **Affiliates** | |  | | | | **Name** | | (Sign) | |
| ※ Should be left blank unless the applicant's character and education is vouched for by a full-time professor at this University. | | | | | | | | | |

I hereby apply to your graduate school (for admission or transfer) with the documents required.

**Applicant: (Sign)**

|  |  |
| --- | --- |
| **Fee** | \ |
| **Confirmation** |  |

**To the Dean of Graduate School of Sun Moon University**

**#2**

**Resume**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Year** |  | | **Application Number** | |  | | |
| **Name** |  | | **Course applied** | |  | | |
| **Department applied** |  | | **Major applied** | |  | | |
| **Date of birth**  **(MM-DD-YY)** |  | | **Nationality** | |  | | |
| **Academic Record** | **Name of the School** | **Department (Major)** | | **Period (From – To)** | | **Scores** | **Venue** |
| Bachelor’s Degree |  |  | |  | | /100 |  |
| Master’s Degree |  |  | |  | | /100 |  |
| **Experience** | **Organization or Business** | **Period (From – To)** | | **Position or Rank** | | **Remarks**  **(Headquarters etc.)** | |
|  |  | |  | |  | |
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|  |  | |  | |  | |
| **Research**  **Activities** | **Year of Publication** | **Name of Thesis and Publications**  **(other research activities)** | | | | **Publishers** | |
|  |  | | | |  | |
|  |  | | | |  | |
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|  |  | | | |  | |
|  |  | | | |  | |
| I hereby attest to the veracity of the above.  **Date(MM.DD.YY): . .**  **Applicant (Sign)** | | | | | | | |

**#3**

**Personal Statement**

|  |  |  |  |
| --- | --- | --- | --- |
| **Year** |  | **Application Number** |  |
| **Name** |  | **Course applied** |  |
| **Department applied** |  | **Major applied** |  |
|  | | | |

**#4**

**Plan for Study**

|  |  |  |  |
| --- | --- | --- | --- |
| **Year** |  | **Application Number** |  |
| **Name** |  | **Course applied** |  |
| **Department applied** |  | **Major applied** |  |
| **※ Describe your plan for study after admission in terms of the following three areas. (English is acceptable)**  **1. Reason for Study and Goals 2. Research Plan for Future 3. Others** | | | |

**#8**

**Signed Consent Form**

By signing this form, I give my permission for the release of my degree/enrollment records. I hereby authorize you to provide full assistance to SUN MOON University when SUN MOON University requests to verify my records.

Please indicate accuracy of the information on the left box. If necessary, include corrections/notes.

**• Applicant's Information**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Completed by the applicant** | | | **Verification**  **(To be completed by the institution)** | |
| **Name** | **Given** |  | **□ Correct** | **□ Incorrect** |
| **Family** |  | **□ Correct** | **□ Incorrect** |
| **Date of birth**  **(MM-DD-YYYY)** | |  | **□ Correct** | **□ Incorrect** |
| **Student ID No.** | |  | **□ Correct** | **□ Incorrect** |
| **Date of admission**  **(transfer date from other institution)** | |  | **□ Correct** | **□ Incorrect** |
| **Date of graduation** | |  | **□ Correct** | **□ Incorrect** |
| **Degree in (major)** | |  | **□ Correct** | **□ Incorrect** |
| **Degree** | | □ Bachelor □ Master □ Ph. D | **□ Correct** | **□ Incorrect** |
| **Title of thesis** | |  | **□ Correct** | **□ Incorrect** |
| **Date of Degree Conferment(registered)** | |  | **□ Correct** | **□ Incorrect** |
| **Applicant’s signature:**  **Date(MM.DD.YYYY): . .** | | | Additional comments(if any) | |

**• Respondent's Information**

|  |  |  |  |
| --- | --- | --- | --- |
| **Name of organizaion** |  | | |
| **Address** |  | | |
| **Telephone** |  | **Fax** |  |
| **E-mail** |  | | |

**Date(MM.DD.YY): . .**

**Name and title of position: (Sign)**

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**SUN MOON UNIVERSITY Graduate School**

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