

# SEOUL NATIONAL UNIVERSITY **APPLICATION FOR SNU PRESIDENT FELLOWSHIP SPRING 2018**

• 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					
Phone	Korea				
	Permanent Residence				
Marital Status	Single		Married	Other	
	For married students only				
		Name		Date of Birth	
	Spouse				
	Children				
	Do you plan to program?	o live with yo	our family for the	duration of your educational	
	$\Box$ Yes (How long?) $\Box$ 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		<ul> <li>Studio room (single/married couple only)</li> <li>Family room (family of your spouse and children)</li> </ul>		
EDUCATION INF	ORMATION			
UNDERGRADUATE (E	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 EXPERIEN	CE (as a facul	ty 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.

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