



Application for

Korean Studies Summer Program 2020

*Please **type** the form below.

Personal Information			
Name		Date of Birth	
Nationality		Place of Birth	
Gender		Passport No.	
Telephone No.		E-mail	
Home address			

Academic Information			
School name		Grade	
Major		Minor	
School address			

Other Information			
Favorite Activities & Interest		School Activities	
Food Allergy		Vocational Goal	
Religion		Hobby	
Things you want to do in Korea			
Do you Drink?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Do you smoke?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Korean Proficiency			
<input type="checkbox"/> None	<input type="checkbox"/> Poor	<input type="checkbox"/> Good	<input type="checkbox"/> Excellent

1-Week Optional Program (Teaching Practicum)	
<input type="checkbox"/> Yes	<input type="checkbox"/> No

Arrival Information			
Arrival Date		Arrival Time	(a.m./p.m.)
Flight No.			
Departure Date		Departure Time	(a.m./p.m.)
Flight No.			
★ Airport Pickup Service will be offered.			