

별첨서식2(학력조회동의서)



**Yeungnam
University**

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* All the blanks should be completed by the applicant.

Agreement for Academic Records Verification

To whom it may concern:

I am applying for the Undergraduate Program of Yeungnam University, Korea for the academic year of Fall, 2024, and I hereby agree that Yeungnam University shall rightfully make a request to the institution that I have previously attended in order to verify my academic records.

In this regard, I would like to cordially ask you to provide Yeungnam University with full assistance in verifying my academic records.

저는 2024학년도 2학기 영남대학교 학부과정에 지원하며, 영남대학교가 저의 학적 확인하는 것에 동의 합니다.

이와 관련하여, 영남대학교에서 저의 학적 확인 요청 시 협조하여 주시기 바랍니다.

Applicant's Name _____

Signature: _____ Date: _____

*** Applicant's Information (지원자 정보)**

Name in Full 성명: _____

Date of Birth 생년월일: _____ (Year/Month/Date)

Name of Institution/Country 최종학교명/국가: _____

Date of Admission(or Transfer) 입학(편입)일자: _____ (Year/Month/Date)

Date of Graduation 졸업일자: _____ (Year/Month/Date)

*** Registrar Information of the Institution (최종학교 학적담당자 정보)**

Address (in English) 영문주소: _____

Phone 전화번호: _____ Fax 팩스: _____

E-mail of the Registrar 학적 담당자 이메일: _____