APPLICATION FORM ☐ Summer Korean Language and Culture Program 2024	Dhatarash
	Photograph 3cm×4cm
I . Personal Information	Jeni/\4em
1. Name in Full	
Last Name (Family) :	
First Name (Given) :	
2. Date of Birth: Month Pay Year	
3. Gender : \square M \square F	
4. Nationality:	
5. E-mail Address:	
6. Mailing Address:	
5 :	
II. ACADEMIC Information 1. Name of Institution: 2. Attendance Dates (from-to): 3. Major: III. Current Level of Korean Language 1. Have you ever studied Korean language before? Yes No 2. If yes, how long?	
III. E	
IV. Emergency Contact Information	
1. Name in Full:	
2. Phone No. : 3. Address :	
4. Relation to the Applicant :	
7. Relation to the Applicant.	
I certify that the information provided on this form is accurate and of	complete.
I understand that any untrue or incomplete information may result in the rejection	ction of admission.
Date:	
Signature:	

Please complete this application form and email it to:
Keimyung University
1095 Dalgubeoldaero Dalseo-Gu Daegu 42601, Korea
Tel: +82-53-580-6354, 6357
E-mail: korean@kmu.ac.kr