

Application Form

Summer Korean Language & Culture Camp

Silla Wave 2016

Please, fill in the following information completely and clearly in English (in Capital letters)

Personal Details

Attach full face photograph (passport type) taken within the last 6 month	Applicant Name <i>(* as in your passport)</i>	(Family Name)			
		(First Name)			
	Date of Birth	(dd/mm/yy) / /	Age		
	Place of Birth	(City/Country) /			
	Occupation				
Country of Citizenship		Gender	Female <input type="checkbox"/>	Male <input type="checkbox"/>	
Passport No.		Issue Date		Expiration Date	
Current Mailing Address	<i>(* with postal code)</i>				
Tel. No (Mobile)					
E-mail		Do you need visa to come to Korea?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	

Education Background

Undergraduate	Name of Institution				
	Entrance (dd/mm/yy)		Graduation (dd/mm/yy)		
	Address				
	Major				
Graduate	Name of University:				
	Entrance (dd/mm/yy)		Graduation (dd/mm/yy)		
	Major:				

Language Proficiency

What is your native language? _____

Fluency in Korean: None Elementary Intermediate Advanced

Fluency in English: None Elementary Intermediate Advanced

Other (_____): None Elementary Intermediate Advanced

Emergency Contact					
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No.	Full Name	Relationship	Job	Tel. No.	E-mail
1.					
2.					
3.					

Indicate a person (including yourself) or organization that will be responsible for payment of your Participation Fee					
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Family Name		Given Name		Occupation	
E-mail				Relationship	
Address					
Tel No. (office)		Tel. No. (Mobile)			

Health and Medical Information	
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Do you have any type of disability or medical requirements	Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, please specify:
Do you have any allergies or any food restrictions?	Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, please specify:

I hereby apply for participation in the Summer Korean Language & Culture Program “Silla Wave 2016”, and pledge to comply with regulations of Silla University while I participate in the program. I certify that all above information in this Application is true and correct.

Date: (mm/dd/yy) _____

Applicant (Name): _____

Signature: _____

*** Please, send back the completed form together with the copy of your passport (photo page) by:**

E-mail: alexandra@silla.ac.kr

[Note: please, ensure the accuracy of the information in the graph “Current Mailing Address”. Write the full mailing address (including postal code). The documents necessary for visa application (if needed) will be sent to the mailing address provided in this application form.]