

학력조회 동의서(LETTER OF CONSENT)

To whom it may concern :

This letter is to confirm that I attended (* 출신학교 공식 명칭).

I have applied to Kookmin University in Seoul, Korea for the 입학년도기재 academic year and have agreed to allow Kookmin University to officially request my academic records from previously attended schools.

In this regard, I would like to request your full assistance when they contact you regarding verification of enrollment and transcripts.

<Student's records>

Enrolled Name : *

Student ID Number : *

Date of birth : *

Degree : * _____ Major : * _____

Date of admission (transfer) : *

Date of graduation (withdrawal) : *

<School Information>

※ Please write the information about International Affairs Team of your university. ※

School Name : *

Address : *

Zip code : *

Name of Team: *

Name of Staff : *

E-mail : *

Telephone Number : *

Fax Number : *

Sincerely yours,

Signature

month Date - 20
year

※Applicants should write on the lines marked by *