Application for KU Exchange Clerkship Program



Personal Information

		First Name:	Middle Name:		
		Last Name:			
		Nationality:	Date of Birth:		
	Photo	Home Institution:			
		Expected Graduation Ye	ar:		
		Student's Mailing Addres	ss:		
		Phone No.:	E-mail:		
		-			
D	epartment & Da	ate			
S	pecify primary and	alternative requests consul	ting the list of the departments	on the website. The elective	
sc	chedule must start o	edule must start on Monday and end on Friday. Please note that we require submission of application			
le	ast 3 months prior t	o the start date of the place	ment.		
_	De	eaprtment	From (dd/mm/yyyy)	To (dd/mm/yyyy)	
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Yo Pi	.ccommodation ou should find your o	own accommodation as we c	don't have a dormitory available f	or short-term visiting students	

Letter of Motivation

Please include a detailed description of the reason why you want to undertake electives at Korea University and in the department that you request and about your background knowledge in that field.