**복적/재입학원**

**Application for Readmission**

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| 대학School | 전공Major | 학번Student Number. | 성명Name | 주민등록번호Resident Registration Number |
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| ( )학년도 제( )학기 재입학 하고자 원서를 제출하오니 허가하여 주시기 바랍니다.I hereby submit the application form of readmission for 20 . (1st, 2nd) semester. Please consider a review on it.20 . . 신청인 (Applicant) (signature)연락처 (Contact) (phone) (e-mail)

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| 지도교수Advisor | 학과장Dept. Chair |
|  |  |

교무담당 (Registrar) : (signature)서울대학교 국제대학원장Dean of Graduate School of International StudiesSeoul National University |