



# SEOUL NATIONAL UNIVERSITY

Office of Admissions, Seoul National University  
1 Gwanak-ro, Gwanak-gu, Seoul 151-742, Korea

Tel 82-2-880-5021, Fax 82-2-873-5021

Session : March, 2015

Name of Institution : ① \_\_\_\_\_

- School/Dept./Major : ② \_\_\_\_\_

- Duration of Enrollment : ③ \_\_\_\_\_ ~ \_\_\_\_\_

- Address : ④ \_\_\_\_\_

- Date of Graduation: ⑤ \_\_\_\_\_ Degree : ⑥ \_\_\_\_\_

To whom it may concern :

We are pleased to inform that (⑦ \_\_\_\_\_), your alumni/alumnae or a current student, has been admitted to Seoul National University. Please examine the enrollment record above, complete the verification report below and return it to us as soon as possible. Do not separate the verification report portion as the form is required to be returned in its entirety. Your answers are appreciated and will be held in strict confidence.

Thank you for your cooperation.

Sincerely yours,

\_\_\_\_\_  
Kim, Young-Hwan  
Director, Division of Admissions  
Seoul National University

## LETTER OF AGREEMENT

To whom it may concern :

Please note that I have applied to Seoul National University in Seoul, Korea for the 2015 Spring Semester and agree that Seoul National University could rightfully make a request for my enrollment records.

In accordance with my agreement, I request your full cooperation to Seoul National University in providing the requested information.

Name : ⑧ \_\_\_\_\_ (Signature) ⑨ \_\_\_\_\_

Date of birth : ⑩ \_\_\_\_\_

## VERIFICATION REPORT

Accuracy of above enrollment record : Correct  Incorrect

Additional comments :

Name : \_\_\_\_\_ Title : \_\_\_\_\_ (Signature) \_\_\_\_\_