2019 KAIST CAMPUS Asia Research-oriented Program Application Form

University Email Address *Primary Email of Contact* Personal E-mail Address *(mail@com, 365@com, etc)*		Participation Period	

Personal Information

	Full Name	Last Name	First Name	Middle Name
Less than 3 months old Passport Size Photo				
	Passport Number (expired passport not accepted)		Nationality (as shown on your passport)	
	Date of Birth (YY-MM-DD)		Gender	
Emergency Contact Person		Name		
		Relationship		
		Mobile Phone Number (including country code)		

※ To add a photo, click "Edit Text & Images" on the toolbar and then "Add Image".

Contact Information

Postal Address (including postcode)	
Mobile Phone Number (including country code)	

Academic Information

Home Institution		Current Year of Study	
Department at Home Institution			
Department at KAIST			

※ Names of departments at KAIST can be found at http://www.kaist.ac.kr/html/en/edu/edu_030101.html.
You are NOT allowed to choose any Schools and Departments under College of Business, since this College is located separately in a different city.
The one and only exception that you CAN choose is School of Business and Technology Management.

Research Plan at KAIST

	Department of Interest at KAIST	Laboratory of Interest at KAIST	Professor in Charge of the Lab
1			
2			
3			
4			
5			

※ Names of departments, labs, and professors in charge can be found at http://www.kaist.ac.kr/html/en/edu/edu_030101.html.
You are NOT allowed to choose any Schools and Departments under College of Business, since this College is located separately in a different city.
The one and only exception that you CAN choose is School of Business and Technology Management.

Title of Your Research	
Description Summary of Your Research	

Submission of Other Required Documents

※ Tick(v) if prepared.

Valid Passport Copy
Official Academic Transcript Copy
Official English Test Result Copy
Curriculum Vitae (Free Format)

I hereby certify that the above information are true and correct. I understand and agree that any false information indicated herein may affect the result of my application.

Applicant's Name: Submission Date (YY-MM-DD):