



Application for Re-admission

(*Re-admission shall be permitted when there is a vacancy within the student quota of the relevant division or department. Re-admission is permitted once.)

1. Personal Information

Student I.D No.		Student Record Name	Name registered at KU
College/School		Department	
Name in Full	(Please write the exact name printed on your Alien Registration(Residence Card) or 주민등록증)		
Date of Birth		Gender	
Admission Date		No. of semester Enrolled at KU	
Exclusion Start Date		Earned Credits	Credits you have achieved
Exclusion Type			
Phone No.		E-mail	
Present Address			

2. Declaration of Major Change (only for eliminated major)

(e.g. College of Liberal Arts, Department of Psychology → School of Psychology, Psychology)

College/School		Department	
Re-admission College/School		Re-admission Department	
Reason of Major Change	(Must be written by the department staff, 대학 행정팀에서 변경 사유 기재)		
Declaration of Major Change			
I hereby agree to accept the change of major due to the elimination of my previous major/department. I understand that the is no right of appeal against the decision made upon my successful application for re-admission.			
			Name _____ (Signature)



3. Guardian Information

Name		Gender	
Emergency Contact No.		Relationship with the Applicant	<input type="checkbox"/> Parent <input type="checkbox"/> Sibling <input type="checkbox"/> Spouse <input type="checkbox"/> Adult Children <input type="checkbox"/> Other ()
Address			

I certify that, to the best of my knowledge, the information above and attached are correct and complete. This application for 2025-1 re-admission is also signed by my guardian.

※ Required Documents

- 1) Explanation for Re-admission and Statement of Purpose, Letter of Pledge
- 2) Certification of School Register(학적증명서) and Academic Transcript(성적증명서) (available at One-stop Service Center or Portal – Quick Service – New Certificate)

YYYY / MM / DD

Name of the Applicant : (signature)

Guardian of the Applicant : (signature)

4. Confirmation of the Department Office (행정팀에서 모두 서류 확인 후 작성)

Staff	Name: _____ (Signature)
Department Chair/Associate Dean	Name: _____ (Signature)
Dean	Name: _____ (Signature)

신청자가 해당되는 항목을 모두 작성하고, 구비 서류를 모두 갖추었는지 확인 후 작성 부탁드립니다. 외국인 학생의 경우, 본교에 등록된 이름(Student Record Name)과 외국인등록증에 등록된 이름(Name in Full)이 상이할 수 있으므로 반드시 확인 부탁드립니다.



Explanation for Re-admission and Statement of Purpose

1. Personal Information

Student ID No		Student Record Name	Name registered at KU
College/School		Department	
Re-admission College/School		Re-admission Department	
Exclusion Type	<input type="checkbox"/> Failed to register for a semester by the deadline <input type="checkbox"/> Failed to return within the registration period after the rationale for absence is no longer valid <input type="checkbox"/> Reached a certain number of academic warnings <input type="checkbox"/> Permitted to withdraw from the student register <input type="checkbox"/> Dismissal from the school through a disciplinary process <input type="checkbox"/> Others (Please explain;)		
Other Issues Regarding Exclusion	<p>Have you ever been subject to any disciplinary action at any school or college?</p> <input type="checkbox"/> If Yes, please explain in detail () <input type="checkbox"/> No		

(Please fill both College/School and Re-admission College/School even if it remains unchanged)



2. Explanation for Re-admission

2-1. Factors leading to your exclusion

Please give a detailed explanation;

2-2. Changes in circumstances after academic exclusion from university (including any evidence to prepare for your re-admission application)



3. Study Plan

YYYY / MM / DD

Name of the Applicant :

(signature)



Letter of Pledge

1. Student Information

College/School		Department	
Re-admission College/School		Re-admission Department	
Student ID No		Student Record Name	Name registered at KU
Date of Birth		Gender	
Present Address			

(Please fill both College/School and Re-admission College/School even if it remains unchanged)

2. Guardian Information

Name		Gender	
Emergency Contact No.		Relationship with the Applicant	<input type="checkbox"/> Parent <input type="checkbox"/> Sibling <input type="checkbox"/> Spouse <input type="checkbox"/> Adult Children <input type="checkbox"/> Other ()
Address			

As a re-admitted student, I agree to obey all the rules and regulations of the university and maintain the honor of Korea University. This Letter of Pledge is also signed by my guardian.

YYYY / MM / DD

Name of the Applicant : (signature)

Guardian of the Applicant : (signature)