



ADMISSION APPLICATION(입학원서)

Date(날짜): _____

Term(등록학기) Winter (겨울) Spring (봄) Summer (여름) Fall (가을) Year(년도):: _____

Program Type (학과) : _____ On-Campus _____ Distance Learning(온라인)



Program / Degree Title (mark one) (전공/학부를 표시해주세요)

School of Theology(신학)	School of Oriental Medicine(한의학)	School of Business and Management(경영학)	School of Languages(언어)
Certificate in Marriage and Family Counseling (결혼/가정 상담 수료과정)	Master of Oriental Medicine (한의학 석사)	Associate of Arts in Accounting (준학사: 회계학)	ESL 100 Certificate (언어수료과정 100)
Bachelor of Arts in Theology (신학사)		Bachelor of Business Administration: International Management, MIS, Marketing, Sport Management(Golf), Accounting, Martial Arts (학사: 경영학)	
Master of Arts in Religion (종교학 석사)		Master of Business Administration: International Management, MIS, Marketing Management, Martial Arts Management (석사: 경영학)	
Master of Divinity (목회학 석사)	Doctor of Oriental Medicine in Research Advancement (한의학 박사)	Doctor of Business Administration: International Marketing Management (박사: 경영학)	ESL 300 Certificate (언어수료과정 300)
Master of Theology (신학석사)			TOEFL Preparation (토플준비반)
Doctor of Ministry (목회학 박사)			TESOL Certificate (태솔수료과정)
Doctor of Theology (신학박사)			Business English (비즈니스영어)

Applicant's Information: (입학지원자 인적사항) (Please Print)

(Please attach one passport size picture and photocopies of social security and identification cards, or passport identification)

Applicant's Name(성함) _____ Male / Female _____
Gender (성별) Social Security(사회보장번호) _____ State ID No.(운전면허번호) _____

Street Address (주소) _____ () _____ () _____
Home Phone No.(자택전화번호) Cell Phone No. (휴대)

City (시) _____ State (주) _____ Zip-code (우편번호) _____

E-Mail Address (이메일)

Ethnicity(국적)

Date of Birth (생년월일)

Occupational Information (직장): (Please Print)

Occupation (직업)

Employer's name (고용주 성함)

Work Phone No(직장연락처)

Address (주소)

City(시)

State(주)

Zip-code (우편번호)

Supervisor's name (담당자 성함)

Phone No. (담당자 연락처)

Emergency Contact Persons (비상연락처): (Please Print)

Emergency Contact Person's name 1

Relationship

Phone No.

Emergency Contact Person's name 2

Relationship

Phone No.

Educational Information (교육/학업사항): (Please Print)

(라이프 대학에 입학하시기 전에 다니셨던 모든 학교의 인적사항을 적어주십시오.)

School's name(학교이름)

Major (전공)

Year (년도)

Address (주소)

City(시)

State(주)

Zip-code (우편번호)

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City(시)

State(주)

Zip-code (우편번호)

I certify that all of the above statements are true and correct to be best of my knowledge. Falsification of information can result in the termination of my enrollment at Life University.

Applicant's Signature

Date

