

2022 Fall

CONSENT FORM OF ACADEMIC INQUIRY (학력조회동의서)



SUNGKYUNKWAN UNIVERSITY

Office of Graduate School Affairs  
25-2, Sungkyunkwan-ro, Jongno-gu, Seoul, Korea

NO	
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Tel: +82-2-740-1728  
<http://www.skku.edu>  
[intlgrad@skku.edu](mailto:intlgrad@skku.edu)

※Applicants should fill in the blanks marked with \* in English only

To Whom It May Concern:

This letter is to confirm that I graduated from (\*Name of your graduated school \_\_\_\_\_).  
I have applied to Sungkyunkwan University in Seoul, Korea for the \*2022 academic year and have agreed to allow Sungkyunkwan University to officially request my academic records from the schools I graduated from.

In this regard, I would like to request your full assistance when the University's Office of International Student Services contacts you regarding verification of enrollment and transcripts.

Enrolled Name: \* \_\_\_\_\_

Student ID Number: \* \_\_\_\_\_

Date of Birth: \* \_\_\_\_\_

Date of Admission (transfer): \* \_\_\_\_\_

Date of Graduation (withdrawal): \* \_\_\_\_\_

(\*Information at the graduated school)

Sincerely,

\* \_\_\_\_\_  
Signature

\* (month) - (day) -  
Date

※일자 표기 예시 (Example)

10 - 10 - 2022  
(월:Month) (일:Day) (년:Year)

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LETTER OF REQUEST FOR ACADEMIC INQUIRY (학력조회동의서)



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\*Date: . . . (dd/mm/yyyy)  
\*Name of school:  
\*Address of school:  
\*Zip Code: \*School Phone Number:  
\*Fax: \*School or Staff E-mail:  
\*Student Name: \*Student ID Number:

## Subject: Requesting Student Information

Dear Sir or Madam,

The above applicant has submitted educational documents issued by your institution to our university. We ask that you please verify the accuracy and authenticity of the enclosed documents. We need your confirmation about his/her graduation, field of major, and date of graduation. Please fill in the lines below and return this document to our office. You may respond via fax or mail.

Thank you for your cooperation. We look forward to hearing from you soon.

Sincerely,

Vice President of International Affairs \_\_\_\_\_

## Questions to Verify Student Information

Student's Name: \_\_\_\_\_

Degree: \_\_\_\_\_

Major: \_\_\_\_\_

Date Conferred: \_\_\_\_\_

Name of Institution: \_\_\_\_\_

Signature of University Official \_\_\_\_\_