**[UNIST Academic Form 19]**

**Request for changing Academic Records**

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|  |  |  |  | Undergraduate □ | Graduate □ |

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| 1. Personal Information | | | | | |
| Study Program | EMB0000120c3395 B.S. EMB0000120c3396 M.S. EMB0000120c3397 Ph.D. EMB0000120c3398 MS – PH.D. | | | | |
| School |  | | Contact Number | |  |
| Name |  | | Student ID | |  |
| 2. Items to change | | | | | |
|  | | Old | | New | |
| Name | |  | |  | |
| Date of Birth | |  | |  | |
| Nationality | |  | |  | |
| 3. Reason(s) for change | | | | | |
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| This request is submitted for permission of changing academic records.  Date :　　　　　　 (MM/DD/YY)  Applicant : 　　　　　　(Signature)  To the President of UNIST  Attached : A copy of document (which proves things to change) | | | | | |