**Request for Voluntary Permanent Academic Leave**

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| **Approval** | **Person-in-charge** | **Team leader** | **Dean**  | **President** |
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\* leave the above blanks

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| **Student ID No.** |  | **Name** |  |
| **Affiliation** |  | **Name of Major** |  |
| **School Registration Status** |  | **Contact No.** |  |
| **Reason for Voluntary Permanent Leave** |  |
| **I hereby ask for permission for my voluntary permanent academic leave.** Date: YYYY/MM/DDApplicant : (signature)Advisor : (signature)(if applicable) Co-Advisor : (signature)Chief Major Professor : (signature)  Campus Representative Professor : (signature) |
| **To the President of Korean University of Science & Technology** |

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| **Bank Account Information for refund of tuition fee** **- If students paid it in person, please write your own bank account** **- If it is paid by student’s affiliated campus, please write campus account’s information****Please attach the copy of bank account note’s first page**  |   | **Confirmation of librarian, UST main office**  |
| **Write the bank account of information** |  |  |