Call	940-50°
USI	CONTRACTOR OF
	SUPPORT
	USAG-DAEGU

## **USAG DAEGU INTERNSHIP PROGRAM**

## **APPLICATION FORM**

Session	Spring (March –	August)	Fall (Sept	tember – Febru	uary) Date:				
SECTION I – GENERAL PERSONAL INFORMATION									
1. Name of University:					2. Sex Male Female				
3. Name (Last, First, Middle)					4. Date of Birth (YYYMMDD)				
5. Korean ID Number:									
6. Physical Address:									
7. Cell Pho	ne Number:	se of emergency / cell phone number:							
SECTION II – CHOICE OF DEPARTMENT <ul> <li>Choice must somehow be related to the college major</li> </ul>									
		Place in c a)	order E	xplain why you	would like to be placed in this department				
9. Choice	of Department	b)							
		c)							
<ul> <li>SECTION III – EDUCATION</li> <li>Copy of transcripts is required. Failure to submit transcript will disqualify the applicant</li> </ul>									
10.a. College Major:				10.b. Double Major:					
10.c. Minor Degree:				10.d. Grade Point Average:					
10.e. Select your status as applicable to the session that you are applying for:									
SECTION IV – WORK EXPERIENCE									
11.a. Job Title:				11.a.1. Period:					
11.a.2. Du	ties:								
11.b. Job Title:				11.b.1. Period:					
11. b.2. Duties:									

SECTION V – VOLUNTEER EXPERIENCE									
12. a. Job Title:		12.a.1. Period:							
12. a.2. Duties:		1							
12. b. Job Title:		12.b.1. Period:							
12. b.2. Duties:									
SECTION VI – ENGLISH PROFICIENCY									
13.a. Test Name	13.a. Test Name 13.a.1. Score			C. Command level of English					
1.	1.			Basic					
2.	2.			Intermediate					
3.	3.			Advanced					
SECTION VII – CERTIFICATIONS									
13.a. Certification Title	13.a.1 Date of Completion								
1.		1.							
2.	2.								
3.		3.							
SECTION VIII – WHY DO YOU WANT TO BE A USAG DAEGU INTERN									
Please briefly let us know why you			DROCE						
SECTION IX – HOW DID YOU BECAME OF THIS PROGRAM									
University USAG Daegu Intern Program Facebook Page Friends Other									
I certify that all of my responses to this application form are true and accurate. I accept that if my supporting documentation and/or later steps in the selection process do not support one or more of my responses to the application form that my application may be rated lower and/or I may be removed from further consideration. Signature: Date:									