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확 인 서

Confirmation Letter

과 정 Degree Program	Master / PhD	학과/전공 Department/Major	International / Korean Studies
학 번 Student No.		성 명 Full Name	
연락처 Mobile Phone			
휴학 사유 Reason(s) for Leave of Absence	질병휴학 Special Leave of Absence Due to Illness		
휴학 기간 Period of Leave of Absence	2023학년도 1학기 (2023. 3. . ~ 2023. 8. 31)		
면담소견 Interview	<p>※ The professor in charge will fill out this part.</p> <p><u>면담교수(성명)</u> Interviewer(Name of Professor) <u>Signature</u></p>		

□ 면담교수는 지도교수(Advisory Professor) 또는 학과 주임교수(Chief Professor)가 할 수 있음

※Please leave below the 'Interview' box blank. After collecting this document for all applicants and arranging a time for telephone interview, Chief Professor(Students in 1st, 2nd Semester) or Advisory Professor(Students in 3rd, 4th or above semester) will individually interview the applicants.

위 학생의 휴학(질병휴학)에 관하여 상담을 하였습니다.

Consultation was held on the leave of absence(due to illness) of the above-mentioned student.

년(year)

월(month)

일(day)

지도교수(or 주임교수)

(Signature)

Advisory Professor(or Chief Professor)

고 려 대 학 교 총 장 귀하