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| --- | --- | --- | --- |
| Department | Dept.( Major)  | Semester | Master’s semester |
| Name in Full |  | Student ID No. |  |
| Alien registration No. | - |
| Credits you took in Master’s course | Total credits (G.P.A ) \* Please attach the transcript |
| The reason of change the degree process & Future plan after change to Integrated course |  |
| I hereby apply for change of the degree process from Master’s course to Integrated course as an enrolled student in Master’s of Ajou University. (year) (month) (day) Applicant (Signature)Academic Advisor (Signature)**To President of Ajou University** |

**Application form for change of the degree process**

**to Integrated course**