



Application for Data Change of Student Information

Date : / / (YY/MM/DD)

Student No.		Name		Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female
Date of Birth	YY / MM / DD / /	ID No.		Admission YY/MM	
Department/ Grade	<input type="checkbox"/> Undergraduate <input type="checkbox"/> Master's <input type="checkbox"/> Executive Master <input type="checkbox"/> Extension <input type="checkbox"/> Doctoral _____Department_____Division_____Grade				
Changes of Data					
Home phone	Before Change :		Contact phone	Before Change :	
	After Change :			After Change :	
Home Address	Before Change : □□□□□				
	After Change : □□□□□				
Applicant's Signature			Parent's Signature	(only for Undergraduate Students)	

Review the result of Proofreading	<input type="checkbox"/> Confirm the changed information is correct.	Approved by Director of Registrar Office	<input type="checkbox"/> Review and correct.
	<input type="checkbox"/> Has completed the registration of the school data change.		<input type="checkbox"/> Others :
	<input type="checkbox"/> Others		

Notes :

- The School will contact you using the address and the contact phone number filled during admission application.
- If undergraduates need to change their contact address or parent's phone, he/she should get parental consent and their signatures before processing . If changing home address, identification cards with changed home address is sufficient, parent's signature is not needed.