

CMC-Yonsei University Summer Program Application Due Date: Monday, February 23, 2015 Program Dates: June 25-July 31, 2015

Application Fee: none

Commitment Fee: \$500 (due upon acceptance)

Part I:	GENERAL	L INFORM.	ATION
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Name:	Last		Fi	rst			Middle
Preferred Form	of First N	ame or Nickname:					
School ID Numb	ber:						
School:	CMC	Harvey Mudd	Pitzer	Pomona	Scripps		
Class Standing a	at Time of	f Application:	_FrSo	Jr _	Sr		
Major(s) or Pros	spective N	/Iajor(s):					
Expected Grad I	Date: (Mo	o/Yr)			Female	Male	
Cell Phone:							
Email:							
Campus Mailbo	x Address	S:					
Permanent Addr	ess:						
Home Telephon	e:						
Name of Recom	mender:						
Additional Info	rmation	Required:					
Passport Numbe	er:		E	Expiration I	Date:		-
S.S. Number:			Citizenship:				
Date of Birth:			City of Birth:			-	
my participation	rmission in the Cl	T for my letters of re MC-Yonsei Summ ion and the operati	er Program	to be consu	ulted as necessa		
I give permission Education.	n to the R	legistrar to release	college tran	ascripts, as	required, to the	CMC Cente	er for Global
Applicant's Sign	ature		· · · · · · · · · · · · · · · · · · ·		Ī	Date	



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Part II: ACADEMIC AND CAREER INTERESTS

Based on your interests, please submit a brief statement describing why you would like to enroll in the CMC-Yonsei Summer Program, and how the courses and experience in Korea relate to your academic and/or professional goals.

Students enrolled in the program will be living on campus at Yonsei University with a Korean roommate. Students will also travel with Professor Keil to Hong Kong as part of the program. Please include how these experiences relate to your academic and future career goals.

The statement should be typed, single-spaced and not more than half a page in length.

Part III: PHOTO & PASSPORT COPY

Please submit a photocopy of your passport.

Please email a headshot to studyabroad@cmc.edu

Part IV: ONE LETTER OF RECOMMENDATION

Please submit one confidential letter of recommendation from a faculty member. Please give the faculty member the Faculty Recommendation Form when asking for the letter of recommendation.

Please request your recommender to forward the letter of recommendation and Faculty Recommendation Form to the CMC Center for Global Education, Heggblade Center, Claremont McKenna College, in a sealed envelope with the signature of the recommender on the outside flap of the envelope.

Part V: UNOFFICIAL TRANSCRIPT

Please submit a copy of your unofficial transcript.



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FACULTY RECOMMENDATION FORM

Due Date: Monday, February 23, 2015

Name of Applicant:	Major(s):
refer to any appropriate information from 1	ovided in the Buckley Amendment). I agree that the Dean of Students may my records at The Claremont Colleges and the evaluation may be reviewed ration of the CMC-Yonsei Summer 2015 Courses.
Applicant's Signature	Date
TO: THE RECOMMENDER Kristen Mallory, Director of C	Off-Campus Study
Program. This is a study abroad program venrolled in the course will also travel with	Claremont McKenna College –Yonsei University Summer with both rigorous work and study components. Students Professor Keil to Seoul, Korea, and Hong Kong. Given the ical that we select students who are both capable and willing to
	with your signature and date to CMC Center for Global McKenna College, in a sealed envelope. Thank you very
As someone who is familiar with the app in your recommendation letter:	licant, we are asking you to address the following questions
1. How long and in what capacity hav	ve you known this student?
2. What is your evaluation of the mat	urity level and stability of this student?
3. What is your assessment of the abi	lity of this student to study abroad in Korea and to travel to
Hong Kong as part of the course?	
4. Are there any special consideration	ns of which we should be aware in evaluating this student's
application to this course?	
The Office of Off-Campus Study at CMC as needed (Please initial):	C has my permission to forward my letter of recommendation
Name of Recommender Signature	e of Recommender Date