재정보증서 (Affidavit of Support)

To the President of Shema Global School

[Applicant]

Application Type		☐ Freshman ☐ Transfer Student ☐ Middle School Student		
Grade				
Name	Korean			
	영문			
	한문			
Date of Birth (yyyy/mm/dd)			Gender	☐남 ☐여
Nationality			ID Number of Home country	

[Guarantor]

Name		Relationship with the Applicant	
Nationality		ID Number of Home country	
Occupation			
Address (including Zip code)	( )		
Telephone Number		Mobile Phone Number	

On behalf of the above applicant to Shema Global School, I hereby guarantee that

1) I will bear all necessary expenses during the entire study period.
2) I will bear all expenses resulting from theapplicant's violation of Korean law.

Date (yyyy/mm/dd): _____ _____ _____.

Signature of Financial Supporter:_____

※ Financial guarantors are limited to parents, grandparents, and institutions.