**Application for Change of Degree Program**

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| **Student Name** |  | | **Student ID** |  |
| **Department**  **(Major)** | UEE (ESE/UIE/DME/CSA) | | | |
| **Year/Semester**  **of Admission** | Ex) 2018 / 1st semester | | | |
| **Degree Program Change Request** | **From** | Master’s Program | | |
| **To** | Combined Master's-Doctoral Program | | |
| **Academic Advisor's Recommendation** (A separate sheet can be used.) | | | | |
| **※ Technical Research Personnel** (Korean students must agree with the followings**.)**  본인은 석사과정에서 석·박사 통합과정으로 변경 시 전문연구요원으로 편입이 보장되지  않음을 확인합니다. | | | | |
| I hereby apply for the Transition of Degree Program as stated above.  mm/dd/yyyy                                             Applicant: (Signature)  Academic Advisor: (Signature)  Department Head: Shin, Myoungsu (Signature)  **To the President of UNIST** | | | | |