**Application for Certificate of Expected Degree Conferment**

**학위수여예정확인서 발급신청서**

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| Name  성명 |  | Student No.  학번 |  |
| Department  소속 |  | Degree Course  과정 |  |
| Date of Admission  입학일자 |  | Phone  연락처 |  |

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| Confirmation 확인사항  If the ‘Date of Defense’ has not been confirmed, please write the expected date. (However, only date within this semester is accepted) | | | | |
| Course of B.S.  학사과정 | Total Credits  총 취득학점 | |  | **Type of Degree**  **학위 종류** |
| Date of Defence  학위논문심사 합격일 | |  |
| ( ) B.S. (학사)  ( ) M.S. (석사)  ( ) Ph.D. (박사) |
| Course of M.S.  석사과정 | Credits  취득학점(교과,연구 구분기재) | | Subject:  Research: |
| Date of Defence  학위논문심사 합격일 | |  |
| Course of Ph.D.  박사과정 | Credits  취득학점(교과,연구 구분기재) | | Subject:  Research: |
| Date of Qualifying Exam  전공 Q.E.시험 합격일 | |  |
| Score of English Test  공인외국어 시험점수 | |  |
| Date of Defence  학위논문심사 합격일 | |  |
| Title of Thesis  논문제목 | |  | | |
| Expected Graduation Date  학위수여식 예정일 | |  | | |
| Submitting Entity  제출처 | |  | | |

This application is submitted to issue a certificate of expected degree conferment as it is expected to meet the graduation requirements on that date.

Date :

Applicant : (Sign.)

Advisor : (Sign.)

**To the President of GIST**

**광주과학기술원총장 귀하**