**Application for Admission**

**Semester I plan on starting my studies:**

☐ Fall

☐ Spring

Year \_\_\_\_\_\_\_\_

**Level of Study (choose only one):**

☐ BBA ☐ MS ☐ MBA

Have you previously been a SolBridge exchange or study abroad student? ☐ No ☐ Yes

English score \_\_\_\_\_\_ Test type: IELTS TOEFL TOEIC (circle one) Other\_\_\_\_\_\_\_\_\_\_\_\_

GPA \_\_\_\_\_\_\_\_ (on a 4.0 scale)

**At SolBridge, I will be:**

☐ Freshman

☐ Transfer student - From which university? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Name *(Please enter your legal name as it appears on your passport)***

FAMILY NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

GIVEN NAME(S): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Other names (s) on supporting documents: \_

Gender: ☐ Male ☐ Female

E-mail address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Alternate e-mail address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Mailing address *(This address is where visa documents will be sent)***

Address

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State/Province:

Postal Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Country:

Phone number (including country code): (\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mobile Number: (including country code) (\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mother’s Number: (including country code) (\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Father’s Number: (including country code) (\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Alternate mailing address (if applicable)**

(Valid from YYYY-MM-DD to YYYY-MM-DD) \_ \_ \_ \_ - \_ \_ - \_ \_ to \_ \_ \_ \_ - \_ \_ - \_ \_

Address:

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_State/Province: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Postal Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Country:

**Citizenship and other personal data:**

Date of birth: (YYYY-MM-DD) \_ \_ \_ \_ - \_ \_ - \_ \_

Country of birth:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Country of citizenship:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Passport number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

☐ Dual citizenship – country of other citizenship:

Birthplace of biological mother: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Birthplace of biological father: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***(If your biological mother or father is Korean, please attach proof of citizenship)***

Is English the primary language spoken in your home? ☐ No ☐ Yes.

If no, what language? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you ever been convicted of a criminal offense? ☐ No ☐ Yes.

If yes, please attach an explanation on the nature of the offense.

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Do you have any medical condition(s) that will affect your ability to complete courses?

☐ No ☐ Yes.

If yes, please attach information about the nature of the condition.

**Emergency contact details *(The person to contact in case of an emergency)***

*TITLE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

*FAMILY NAME:* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*GIVEN NAME(S)*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Relationship to you (how do you know this person):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

Phone number (including country code): (\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mobile Number: (including country code) (\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Alternate e-mail address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Declaration**

I understand that, upon registration, my data may be used for any purpose relating to my study in accordance with the procedures of SolBridge International School of Business.

I declare that the information given in support of this application is accurate and complete, and understand that any misrepresentation will result in disqualification of my application and the termination of the admission process.

I give my consent for SolBridge International School of Business to release as required this information to organizations and persons mentioned herein for the purpose of verifying the data supplied.

I understand that if admitted I am responsible for applying to the immigration department of the Republic of Korea for a student visa to stay in Korea for the entire period of study at SolBridge International School of Business.

I understand that the scholarship I am applying for 1) BBA is for the first year of my studies only or 2) MBA/MS first 2 semesters of studies only. I must achieve at least 3.6/4.5 GPA, in order to maintain future scholarship.

I also understand that the university can use my data for promotional and administrative purposes, and I may be asked to provide some service to the university for promotional purposes without payment.

I further understand that I am required to make financial arrangements to ensure all other costs (visa, dormitory, meals, books, personal expenses) required for the duration of my stay in the

republic of Korea are covered.

Signature of Applicant \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Legal Name (print): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**D-2 Visa Sponsorship and Issuance Policy**

**Purpose**

This document explains SolBridge’s policy regarding the sponsorship of international students requiring D-2 Visas. This policy is subject to change and SolBridge is entitled to revise its policies and procedures relating to compliance with its D-2 sponsor duties at any time.

**SolBridge Sponsorship**

● SolBridge students are subject to graduate within 8 semesters in our BBA program and 4 semesters in our MBA/MS program. Therefore, you agree to complete the designated BBA or MBA/MS program you are enrolled in until its completion at SolBridge.

● D-2 VISAs are only valid during the duration of the student’s course of study at SolBridge.

● SolBridge may withdraw sponsorship if it is not necessary to continue sponsorship or if SolBridge cannot fulfill its sponsor duties.

● Sponsorships may be withdrawn at any time for any breach of compliance by SolBridge.

● D-2 VISAs will be revoked in circumstances where students leave SolBridge either voluntarily or by dismissal.

● SolBridge reserves the right to deny students’ application for dropping out of SolBridge until receiving proper verification of their returning to their home of origin.

● Students who do not complete their studies at SolBridge for any reason, including transferring to or re-entering into another university, must return to their home countries in order for their application to drop out be approved.

I hereby acknowledge that I have reviewed, understand and agree to all the terms pertaining to the D-2 VISA policy as mentioned above.

Signature of Applicant \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Legal Name (print): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_