**Curriculum Vitae**

1. **Personal Information**

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| --- | --- | --- | --- | --- | --- | --- |
| **First name** |  | **Middle name** |  | | **Last name** |  |
| **Gender** |  | | **Nationality** | |  | |
| **Date of Birth** | *(DD - MM – YY)* | | **Passport No.** | |  | |
| **Permanent address** |  | | | | | |
| Street & Number City State Zip Code Country  *\* Please do not use P.O. Box address* | | | | | |
| **Home Phone** | (+ ) - ( ) – ( )  Country City Phone No. | | | **E-mail** | 1) | |
| **Mobile** | (+ ) - ( ) – ( )  Country City Phone No. | | | 2) | |

1. **Education History**

*\* Please write down from elementary to the highest degree received*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Period**  **(DD-MM-YY)** | **Name of Institution** | **Location**  **(City, Country)** | **Major subject** | **Earned Degree** | **Length of Study**  **(Years of Study)** |
| **~** |  |  |  |  |  |
| **~** |  |  |  |  |  |
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1. **Work Experience**

*\* Please write down work experience in detail and add more table if you need*

|  |  |  |  |
| --- | --- | --- | --- |
| **Period** |  | **Period** |  |
| **Name of Institution / Company** |  | **Name of Institution / Company** |  |
| **Location**  **(City, Country)** |  | **Location**  **(City, Country)** |  |
| **Position** |  | **Position** |  |
| **Main activities and responsibilities** |  | **Main activities and responsibilities** |  |

1. **Personal skills and Competences**

*(Please write down any of your personal skill and competency in focusing language proficiency, computer skills and extra-curricular activities, and add more if you have more)*

* Language proficiency
* Computer skills
* Extra-Curricular Activities

**5. Health and Wellness information**

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| --- |
| Mild physical or psychological conditions can become serious under the stresses of life while studying abroad. Thus, it is important for us to be made aware of any medical and emotional conditions, past or current, which might affect you in a foreign study context. The information provided will be shared only with appropriate persons affiliated with your specific program and does not affect your admission into the program. Please be honest to answer the questions. |

1. Have you ever been or are you currently being treated for a physical health condition?

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Yes: |  |  | No: |  | If yes, please explain: |  |  |

1. Have you ever been or are you currently being treated for a mental health condition (psychological or emotional)?

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Yes: |  |  | No: |  | If yes, please explain: |  |  |

1. Are you taking any medication?

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Yes: |  |  | No: |  | If yes, please explain: |  |  |

1. Have you had any major injury, disease or ailments in the past five years?

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Yes: |  |  | No: |  | If yes, please explain: |  |  |

1. Is there any additional information that would be helpful for us to be aware of during your study abroad period?

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Yes: |  |  | No: |  | If yes, please explain: |  |  |

**Thank you for your cooperation**

**Graduate School of International Studies**

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