



# KU Consent Form to Collect, Use, and Disclose Personal Information

개인정보 보호법에 의거 귀하의 개인정보를 아래와 같이 “수집·이용·제 3자 제공”에 동의를 얻고자 합니다. 다음의 사항을 충분히 읽어 보신 후, 동의 여부를 체크, 서명하여 주시기 바랍니다.

In accordance with the Personal Information Protection Act, your consent is required to collect, use, and disclose your personal information. Please read carefully and fill in all information—write the name of your home university, check whether you agree with the statement or not, and provide your signature.

귀하께서는 개인정보 수집, 이용 및 제공에 거부할 권리가 있습니다.

You have the right to object to the collection, use, and disclosure of your personal information.

## 1. 개인정보의 수집 및 이용

### Collection and Use of Personal Information

수집, 이용하려는 개인정보의 항목 Personal information collected and used	개인정보의 수집, 이용 목적 Purpose of collecting and using personal information	개인정보 이용기간 및 보유기간 Period of using and maintaining personal information
Name, gender, date of birth, date of admission, nationality, passport information, student ID#, grades, home university name, major at home & host university, etc.	Administrative procedures pertaining to exchange & visiting students such as admissions, alien registration, student registration, academic records, etc.	Indefinite
<p>거부에 따른 불이익: 본교 학사관리에 반드시 필요한 사항으로 거부하실 경우 일부 학생지원업무가 불가능함을 알려드립니다. Disadvantages for objecting collection and use of your personal information: The Office of International Affairs and the Registrar at Konkuk University may not be able to provide you with certain academic and/or administrative services. For example, Konkuk University cannot issue a Certificate of Admission for you to obtain a Korean visa nor will you be able to register for classes.</p> <p style="text-align: center;">I agree <input type="checkbox"/>      I disagree <input type="checkbox"/></p>		

## 2. 개인정보의 제3자 제공

### Disclosure of Personal Information

개인정보를 제공받는 기관 Disclosing Institution	제공하려는 개인정보의 항목 Personal information disclosed	개인정보를 제공받는 자의 개인정보 이용목적 Purpose of disclosing personal information	개인정보를 제공받는 자의 개인정보 이용기간 및 보유기간 Period of disclosure
출입국관리사무소 Immigration Office	Name, date of birth, date of admission, year of study, major at host university, etc.	Immigration affairs	1 year
모교 대학명 Name of home university	Name, gender, date of birth, date of admission, student ID#, grades, major at host university, etc.	Administrative procedures pertaining to transfer of academic credits	1 year
<p>거부에 따른 불이익: 본교 학사관리에 필요한 사항으로 거부하실 경우 일부 학생지원업무가 불가능함을 알려드립니다. Disadvantages for objecting disclosure of your personal information: The Office of International Affairs and the Registrar at Konkuk University may not be able to provide you with certain academic and/or administrative services. For example, the Registrar will not be able to send your transcript to your home university. You will be able to obtain your transcript only by appearing at the Registrar in person with proper identification.</p> <p style="text-align: center;">I agree <input type="checkbox"/>      I disagree <input type="checkbox"/></p>			

본인은 본 “개인정보의 수집·이용·제3자 제공 동의서” 내용을 읽고 명확히 이해하였으며, 이에 동의합니다.  
I have read and understood the “Consent Form to Collect, Use, and Disclose Personal Information” and I hereby authorize Konkuk University to collect, use, and disclose my personal information for the above-mentioned purposes.

Date \_\_\_\_\_

Name \_\_\_\_\_

Date of Birth \_\_\_\_\_

Signature \_\_\_\_\_

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1. 개인정보의 수집 및 이용 Collection and Use of Personal Information		
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개인정보를 제공받는 기관 Disclosing Institution	제공하려는 개인정보의 항목 Personal information disclosed	개인정보를 제공받는 자의 개인정보 이용목적 Purpose of disclosing personal information	개인정보를 제공받는 자의 개인정보 이용기간 및 보유기간 Period of disclosure		
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<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%; padding: 5px;">모교 대학명 Name of home university</td> <td style="padding: 5px; color: blue; font-size: 1.2em;">ABC UNIVERSITY</td> </tr> </table>	모교 대학명 Name of home university	ABC UNIVERSITY	Name, gender, date of birth, date of admission, student ID#, grades, major at host university, etc.	Administrative procedures pertaining to transfer of academic credits	1 year
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I have read and understood the “Consent Form to Collect, Use, and Disclose Personal Information” and I hereby authorize Konkuk University to collect, use, and disclose my personal information for the above-mentioned purposes.

Date 2017/08/23  
Name KONWOO LEE  
Date of Birth 1994/05/15  
Signature