**KAIST Stem Cell Center**

**2025 Summer Research Internship Program**

**Please save your completed application as a PDF file**

**with the file name “First Name\_Last Name\_application.pdf”**

**APPLICANT INFORMATION**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Applicant**  **Info** | **First (Given) Name** | *(Legal Passport Name)* | | | **Date**  **of**  **Birth** | | *(YYYY/MM/DD)* | |
| **Last  (Family) Name** | *(Legal Passport Name)* | | | | **Sex (M/F)** | | *(For dormitory assignment)* |
| **Email address** |  | | | | | | |
| **Point of Departure** | *(City & Country of Departure when coming to KAIST)* | | | | | | |
| **Affiliated School**  **& year of study** | **Name** |  | | | | | |
| **Current Year of Study** | *(3rd/4th)* | **Location (Country) of School** | |  | | |
| **Lab choice**  (Choose 3 preferred labs from  “Lab\_ list.xlsx” file) | **No.** | **Lab Name (Professor)** | | | | | | |
| **1** |  | | | | | | |
| **2** |  | | | | | | |
| **3** |  | | | | | | |

**CONSENT FOR**

**PERSONAL INFORMATION COLLECTION AND USAGE**

In accordance with the Personal Information Protection Act, we are seeking your consent for the

collection, usage, and sharing of your personal information as follows:

|  |  |
| --- | --- |
| Category | Details |
| Items of personal information collection | Name/ Passport number/ Address/ E-mail address/ Photo/ Bank account info |
| Period of maintenance and use of collected personal information | 5 years after end of program |
| Purpose of collection | Wire transfer/ Tax deduction/ Accommodation reservation/ Program outcome statistics |
| Refusal rights and disadvantages of refusal | The applicant has the right to refuse consent. However, he/she/they will be restricted from receiving financial support through the program. |

※ Do you agree to the collection and usage of your personal data?

**( Y / N )**

**CONFIRMATION OF PROGRAM ELIGIBILITY**

※ Are you currently enrolled in an overseas university (outside of Korea), and have you completed at least 2 years of coursework?

**( Y / N )**

**CONFIRMATION OF PROGRAM DATES AND LOCATION**

※Are you able to attend the entire period of the internship program, which last 7 weeks from June 30th to August 14th, 2025 on KAIST campus (Daejeon, South Korea) ?

**( Y / N )**

※ If you are unable to attend for the full period, please let us know your dates of availability:

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| **STATEMENT OF PURPOSE (ESSAY)**  Please write an essay of up to 1,000 words, describing your motivation for applying, academic background (past activities), and research interests. |
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