



II. EDUCATION

BACHELOR / ASSOCIATE DEGREE (1)

a. NAME OF INSTITUTION _____

b. LOCATION OF INSTITUTION _____ / _____
City State or Country

c. MAJOR / DEGREE _____
Earned Degree? ☐ Yes ☐ No

d. DATE ATTENDED _____ / _____
Starting Year and Month (Expected) Ending Year and Month

e. GPA (4.0 basis) _____ / _____
Overall Major Only

BACHELOR / ASSOCIATE DEGREE (2)

a. NAME OF INSTITUTION _____

b. LOCATION OF INSTITUTION _____ / _____
City State or Country

c. MAJOR / DEGREE _____
Earned Degree? ☐ Yes ☐ No

d. DATE ATTENDED _____ / _____
Starting Year and Month (Expected) Ending Year and Month

e. GPA (4.0 basis) _____ / _____
Overall Major Only

MASTER'S DEGREE

a. NAME OF INSTITUTION _____

b. LOCATION OF INSTITUTION _____ / _____
City State or Country

c. MAJOR / DEGREE _____
Earned Degree? ☐ Yes ☐ No

d. DATE ATTENDED _____ / _____
Starting Year and Month (Expected) Ending Year and Month

e. GPA (4.0 basis) _____ / _____
Overall Major Only

※ The GPA should be on a 4.0 basis (Pass or Fail is not acceptable). If the transcript GPA is not on a 4.0 basis or if letter grades are given, the applicant must convert them into those of a 4.0 basis.

EXTRACURRICULAR ACTIVITIES

Name of Organization	Period	Brief Description

AWARDS AND SCHOLARSHIPS

Name of Organization	Date	Brief Description

Please provide additional explanations regarding your education (if applicable).

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III. WORK EXPERIENCE AND FUTURE CAREER INTEREST IN PUBLIC ACCOUNTING

WORK EXPERIENCE

Name of Company / Firm	Location (City / State)	Period	Roles / Responsibilities

INTENT IN PUBLIC ACCOUNTING

Please check the field of interest in public accounting.

☐ Audit / Assurance ☐ Tax ☐ Financial Advisory ☐ Others: _____

What are the reasons for pursuing career in public accounting?

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What is your career path and goal after five years upon graduation?

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Please provide additional information which may help us evaluate your application.

How did you find/hear about our scholarship? (as detailed as possible)

To KO&YUN LLP;

The information submitted on this form is correct to the best of my knowledge. If any information in this form is found to be incorrect, I understand that my scholarship would be revoked.

Signature of Applicant

____ / ____ / ____
Month Day Year