수혜경비 상환 면제원									
성	땅		과 정		소속부서				
학생구분			입학년도		졸업년도				
상환금액				상환사유					
상환기간		20							
기상환금				잔 액					
면제 내용		□ 전부면제 □ 일부면제							
유									
위와 같이 수혜경비 상환 면제를 청원하오니 승인하여 주시기 바랍니다.									
20									
신청인: (인)									
광주과학기술원 총장 귀하									

<sup>\*</sup> 관련 증빙자료를 첨부할 것

GIST

Request for Exemption of Scholarship Repayment									
Name		Course		Academi c Dept.					
Student Type		Year of Matriculation		Year of Graduation					
Amount of Repayment			Reason for Scholarship Repayment						
Period of Repayment	20								
Pre-paid Amount	₩		Balance						
Exemption Type	☐ Fully exempted ☐ Partially exempted								
Reason  This application is submitted to obtain approval for exemption of scholarship repayment for the reason as described above.									
Date:									
	App	licant:	(Seal/Signature)						
Attn: The President of the GIST									

<sup>\*</sup> Please attach relevant documents as evidence to support this application.