FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

APPROVAI

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INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* SCHNEEVOIGT IHNO		2. Date of Event Requiring Statement (Month/Day/Year) 03/09/2004	3. Issuer Name and Ticker or Trading Symbol KORN FERRY INTERNATIONAL [KFY]				
(Last) (First) (Middle) 1800 CENTURY PARK EAST SUITE 900				lationship of Reporting Person(s) ck all applicable) Director Officer (give title below)	to Issuer 10% Owner Other (specify below)	5. If Amendment, Date of Original Filed (Month/Day/Year)	
(Street) LOS ANGELES (City)	CA (State)	90067 (Zip)					6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)	
No securities are beneficially owned	0	D		

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)	Expiration D	Date Exercisable and Expiration Date Month/Day/Year) 3. Title and Amount of Securities Underly Derivative Security (Instr. 4)		, ,	Conversion Form: Direct or Exercise (D) or	6. Nature of Indirect Beneficial Ownership (Instr. 5)	
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Price of Derivative Security	Indirect (I) (Instr. 5)	

Explanation of Responses:

03/09/2004 /s/ Peter L. Dunn, attorney-in-fact

** Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.

 $^{^{\}star}$ If the form is filed by more than one reporting person, see Instruction 5 (b)(v).

^{**} Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).