**2020 KOREA-JAPAN JOINT HIGHER EDUCATION STUDENT EXCHANGE PROGRAM**

**Application Checklist**

**University Received Documents (접수대학) :**

**Person in Charge (담당자) : Signature (서명):**

1. Name of Applicant : (Family Name) (Given Name)
2. Country :
3. Desired Program: [ ]  Master’s Degree [ ]  Doctoral Degree

**Please check (√) in the appropriate box.**

|  |  |
| --- | --- |
| **Application Documents** | **Submission Status** |
| **Yes** | **No** |
| 1 | Application Form (Form 1) |  |  |
| 2 | Personal Statement (Form 2) |  |  |
| 3 | Statement of Purpose (Form 3) |  |  |
| 4 | TWO Letters of Recommendation (Form 4) |  |  |
| 5 | Applicant Agreement (Form 5) |  |  |
| 6 | Personal Medical Assessment (Form 6) |  |  |
| 7 | Certificate of Bachelor’s Degree or Bachelor’s Diploma (Original) |  |  |
| 8 | Bachelor’s Degree Transcript (Original) |  |  |
| 9 | Certificate of Master’s Degree or Master’s Diploma (Original) |  |  |
| 10 | Master’s Degree Transcript (Original) |  |  |
| 11 | Applicant’s Proof of Citizenship Document |  |  |
| 12 | Applicant’s Parent’s Proof of Citizenship Document |  |  |
| 13 | Certificate of Valid TOPIK |  |  |
| 14 | Certificate of Valid English Proficiency Test |  |  |
| 15 | Published Papers, Research papers, etc |  |  |
| 16 | Awards |  |  |

**2020 KOREA-JAPAN JOINT HIGHER EDUCATION STUDENT EXCHANGE PROGRAM**

**FORM 1. Application Form for Graduate Degrees**

*Please complete the form below. It* ***must*** *be typed in* ***Korean*** *or* ***English****.*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Full Name성명 | *Family Name 성* | *Given Name 이름* | Gender 성별 | Marital Status결혼여부 | Passport photo taken within the last 6 months최근 6개월 이내 촬영한 여권 사진 |
| [ ]  Male[ ]  Female | [ ]  Single[ ]  Married |
| *\*Please write your* ***full name*** *as indicated on your passport.*  |
| Date of Birth 생년월일(YYYY-MM-DD) |  | Age 나이 |  |
| Country 국가 | JAPAN | Citizenship 국적 | JAPAN |
| Contact Information 연락처**\*Must be applicant’s** | *Address* |
| *Phone (Must start with the country code)*  |
| *E-mail* |
| Program to Apply 지원과정 | [ ]  Master’s Degree 석사과정 [ ]  Doctoral Degree 박사과정 |
| Desired Field of Study희망계열 | [ ]  Liberal Arts 인문과학 [ ]  Social Science 사회과학[ ]  Natural Science 자연과학 [ ]  Technology and Engineering 공학[ ]  Agricultural Studies 농학 [ ]  Medical Science 의·약학[ ]  Arts and Sports 예체능  |
| Most Recently Attended University 최종 학력 | University Name 대학명 |  | Location (Country, City) 소재지(국가, 도시) |  |
| Achieved or Expected Degree 취득학위 | [ ]  Bachelor’s[ ]  Master’s[ ]  Doctoral | Major 전공 |  |
| Thesis Title 학위논문제목 |  |
| Language Abilities 어학능력 | TOPIK Level한국어능력시험성적 | [ ] 1 [ ] 2 [ ] 3 [ ] 4 [ ] 5 [ ] 6 | English Proficiency Test Scores공인영어성적 | *Type* | *Score* |
| Published Papers (If available)출판저서 |  |
| Awards(If available)수상내역 |  |
| Choice of University & Major 지원대학 | University 대학 | Division 계열 | Department 학과 | Major 전공 |
|  |  |  |  |
| Previously Achieved Degree(s)학력 | Period 기간 | University/ Institution 학교명 | Country 소재국 | Major 전공 | Degree 학위 |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| GPA\*(ONLY for terms or semesters completed)성적 (이수학기만) | School Year | 1st year | 2nd year | 3rd year | 4th year | 5th year | Cumulative GPA 평균평점 | Score Percentile 환산점수 |
| Term/ Semester | 1 | 2 | 3 | 1 | 2 | 3 | 1 | 2 | 3 | 1 | 2 | 3 | 1 | 2 | 3 |
| Bachelor’s | / | / | / | / | / | / | / | / | / | / | / | / | / | / | / |  | / 100 |
| Master’s | / | / | / | / | / | / | / | / | / | / | / | / | / | / | / |  | / 100 |
| Doctoral | / | / | / | / | / | / | / | / | / | / | / | / | / | / | / |  | / 100 |
| Employment or Professional Research Experience근무 또는연구 경력 | Period | Institution/ Company | Position | Responsibilities |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| Previous Visitsto Korea 과거 한국 거주 또는 체류 사실 | Period | Purpose of Stay | City or Region | Affiliated Organization |
|  |  |  |  |
|  |  |  |  |
| Previously Received Scholarship Awards from Korean institutions한국장학금수혜 경력 | Sponsor 지원기관 | Grant Amount 지원금액(USD/year) | Period 수혜기간 |
|  | / |  |
|  | / |  |
| 2019년(yyyy) 월(mm) 일(dd)Applicant's Name : (signature)  |

\* Refer to Appendix A for the grade conversion table.

\* Doctoral degree applicants must put grades information both for Bachelor’s degree and Master’s degree.

**FORM 2. PERSONAL STATEMENT**

*Please type in Korean or in English. The letter must be single spaced within ONE page, with the font* ***Times New Roman****, size 11. (\*11 points)*

|  |
| --- |
| o Motivations with which you apply for this programo Your education and work experience in relation to Korea.o Reason for studying in Koreao Any other aspects of your background and interests which may help us evaluate your aptitude and passion for graduate study or research. |

**FORM 3. STATEMENT OF PURPOSE**

*Please type in Korean or in English. The statement of purpose must be single spaced with no more than TWO pages, with the font* ***Times New Roman****, size 11. (\*11 points)*

|  |  |
| --- | --- |
| Goal of study &Study Plan |  *o Goal of study, title or subject of research, and detailed study plan* |
|  |  |
|  |
| Future Planafter Study |  *o Future plan in Korea or another country after study in Korea* |
|  |  |
|  |

**FORM 4. RECOMMENDATION LETTER**

**To the applicant**: Please fill in your name and the other required information below. In turn, deliver or email this form to the person who will write this letter. **NOTE:** Request your recommender to seal his or her letter of recommendation in an official envelope and sign across the back flap upon completion. Recommendation letters that are not sealed and signed will not be accepted.  **Confidential**

Name of Applicant: (Surname) (Given Name)

Nationality: Desired Degree Program: [ ]  Master’s [ ]  Doctoral [ ]  Research Intended Major:

**To be completed by the recommender:**

*Your frank and candid evaluation of the applicant will be highly appreciated in the selection of Global Korea Scholarship awardees and the admissions to a Korean university. We greatly appreciate your time and effort.*

**\*You may use your own recommendation letter template and attach your letter to this form. However, we hope to glean the following information of the applicant from your recommendation letter:**

- How long have you known the applicant and in what relationship?

- What are applicant’s capabilities, strengths, and weaknesses (in regards to academic achievement, passion and interest for intended major, future academic potential, integrity, responsibility, independence, creativity, adaptability, communication skills, and others)?

- Please comment on the applicant’s performance record, potential, or personal qualities which you believe would be helpful in considering the applicant’s application for the proposed degree/research program.

Recommender’s Name

Recommender’s Signature Date

Position or Title: University (Institution):

Address:

 (zip-code: )

Email: Tel:

***\*After completing the recommendation letter, please printout or make 3 photocopies of the letter you wrote and sign all copies (1 original and 3 photocopied letters) respectively. Please enclose all 4 letters in an official envelope and sign across the back flap; the recommendation letters that are not signed will not be considered valid.*** Please return this form and your recommendation letters sealed in an envelope to the applicant. Thank you!

**FORM 5. APPLICANT AGREEMENT**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **As an applicant for 2020 Korea-Japan Joint Higher Education Student Exchange Program for Graduate Degree, I agree to abide by the following;***※ Please read each article, check each box and sign below.*1. The information I have provided in this application forms are true and accurate and all documents I submitted to the National Institute for International Education (hereafter NIIED) are genuine. [ ]
2. I understand that all the documents submitted to NIIED will not be returned regardless of the final outcome of the selection process. [ ]
3. I will abide by all the Korean laws and ordinances. [ ]
4. I will respect and uphold the values of the Korean culture and society. [ ]
5. I will fulfill my responsibilities as a Korean government scholarship student to the best of my abilities. [ ]
6. I will not participate in any form of political activities (such as organizing or joining a political party, attending political meetings, publishing articles and declarations, and organizing or participating in political demonstrations). [ ]
7. I will maintain financial integrity at a personal level. [ ]
8. I accept NIIED’s decision concerning graduate degree program. [ ]
9. I understand that once I am selected as a Korean government scholarship student. I am not permitted to change the university. [ ]
10. I will comply with the academic regulations and requirements of NIIED and the university to be admitted. [ ]

|  |
| --- |
| Date(yyyy/mm/ dd) Applicant’s Name (Signature) |
|  |

*(continued in the next page)* 1. I understand that if I have any dependents that will accompany me to Korea, I am responsible for all matters concerning those dependents such as visa issuance and that NIIED will not provide any extra expenses or support in regards to my dependents. [ ]
2. I give permission to NIIED, the Ministry of Education of Korea, the Ministry of Foreign Affairs of Korea, the Ministry of Justice of Korea, and affiliated institutions to use the contact information provided in my application for the purpose of visa issuance, communication, conducting surveys, and sharing information as needed. I give authorization for photos and video of me to be taken during orientation and used in any promotional or educational materials. [ ]
3. I hereby authorize NIIED to verify the information disclosed in this application form and the documents required as well as to collect any other information deemed necessary to determine my suitability as an applicant from any institution, organization or individual issuing said information and/or documentation. This includes but is not limited to contacting recommendation referees or previous employers. [ ]
4. I hereby understand that all information provided to NIIED will be stored in secured servers where access will be limited to department in charge and its affiliates. I understand that all reasonable efforts will be made to protect confidential and sensitive information. By signing below and submitting my application, I agree to these terms. [ ]
5. I understand that failure to uphold any of the above statements may be grounds for termination of my scholarship offer. [ ]

**I confirm that I read all of the above conditions. I also understand that the violation of any one of the above might result in suspension or cancellation of the scholarship.**

|  |
| --- |
| Date(yyyy/mm/ dd) Applicant’s Name (Signature) |
|  |

 |

# **FORM 6. PERSONAL MEDICAL ASSESSMENT**

***Attention!*** This form is just a personal medical assessment and applicants do not need to get comprehensive medical examination for now. However, once applicants are successful in the 2nd round of selection, in accordance with the requirements of the Korea Immigration Service and Korea-Japan Joint Higher Education Student Exchange Program, applicants must get a comprehensive medical examinations from a licensed physician or a doctor (including TBPE drug test\*\* etc). If the results show that the applicant is unfit to study and live overseas, he/she will be considered disqualified for this scholarship program.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| GENDER | [ ]  Male [ ]  Female | **HEIGHT**  | cm | **WEIGHT**  | kg |
| QUESTION | YES | NO | IF YES, PLEASE EXPLAIN |
| Have you ever had an infectious disease that posed a risk to public health (such as, but not limited to, tuberculosis and STDs)? |  |  |  |
| Do you have allergies?  |  |  |  |
| Do you have hyper tension?  |  |  |  |
| Do you have diabetes?  |  |  |  |
| Do you have any type of Hepatitis?  |  |  |  |
| Have you ever suffered from or been treated for depression, anxiety, or any other mental or mood disorder? (If you have received treatment, please explain and attach an official medical report.) |  |  |  |
| Have you ever been addicted to alcohol? |  |  |  |
| Have you ever abused any narcotic, stimulant, hallucinogen or other substance, either legally or illegally?  |  |  |  |
| Have you been hospitalized in the last two (2) years? |  |  |  |
| Have you had any serious injury, ailment or sickness in the last five (5) years? |  |  |  |
| Do you have any visual or hearing impairment? |  |  |  |
| Do you have any physical disabilities? |  |  |  |
| Do you have any cognitive/mental disabilities? |  |  |  |
| Are you taking any prescribed medication? |  |  |  |
| Are you on a special diet?  |  |  |  |
| Are you pregnant? |  |  |  |