2019 GLOBAL KOREA SCHOLARSHIP

Application Checklist

Ins	titution Receiving Application (접수기관)	REGISTRATION NUMBER			
Per	rson in Charge (확인자) :				
Sig	nature (서명)		WT	11 1	
			*Leave this table	blank	
1)	Name of Applicant : (Surname)	(Giv	ven Name)		
2)	Country :				
3)	Desired Program: Doctoral Degree	☐ Master's Degree	☐ Research		

(*Please check ($\sqrt{}$) in the appropriate box.)

	Annihadian Danmada	Submissi	on Status
	Application Documents	Yes	No
1	Application Form (Form 1)		
2	Personal Statement (Form 2)		
3	Statement of Purpose (Form 3)		
4	Research Proposal (Form 4)		
5	TWO Letters of Recommendation (Form 5)		
6	University's Official Letter of Invitation (Form 6) * Research Program applicants ONLY		
7	GKS Applicant Agreement (Form 7)		
8	Personal Medical Assessment (Form 8)		
9	Certificate of Bachelor's degree or Bachelor's Diploma (Original)		
10	Bachelor's degree Transcript (Original)		
11	Certificate of Master's degree or Master's Diploma (Original)		
12	Master's degree Transcript (Original)		
13	Certificate of Doctoral degree or Doctoral Diploma (Original) * Post-Doctoral Research Program applicants ONLY		
14	Doctoral degree Transcript (Original) * Post-Doctoral Research Program applicants ONLY		
15	Certificate of Employment (Original) * Research Program applicants ONLY		
16	Applicant's Proof of Citizenship Document		
17	Applicant's Parent's Proof of Citizenship Document		
18	Proof of Overseas Korean Document * Overseas Koreans ONLY		
19	Proof of Korean Citizenship Renunciation Document * Previous Korean citizenship holders ONLY		
20	Proof of Korean Adoptee Document *Overseas Korean Adoptees ONLY		
21	Certificate of Valid TOPIK		
22	Certificate of Valid English Proficiency Test		
23	Published Papers, Research papers, and etc.		
24	Awards		

2019 GLOBAL KOREA SCHOLARSHIP

FORM 1. Application Form for Graduate Degrees

Please check (\boxtimes) the following. Click the box to check or uncheck.

1. Application Track 추천기관

□ Embassy 재외	y 재외공관 University 국내대학										
2. Type of Applicat	ion 추천유형										
□ General 일반	추천 □ Overseas	Kore	ean Adoptee 입은	·단	□ Ove	erseas Korean	재외동포				
3. Desired Field of Study 희망계열											
☐ Liberal Arts an	□ Liberal Arts and Social Science 인문사회계열										
☐ Science, Techr	□ Science, Technology and Engineering 자연공학계열										
☐ Arts and Sports	□ Arts and Sports 예체능계열										
4. Program to Apply	y 지원과정										
☐ Doctoral Degre	ee 박사과정 🗆 M	laster	r's Degree 석사]	과정	□ F	Research 연구고	과정				
Please complete the	form below. It must i	be ty	ped in English (ONLY.							
T. 41.17	Surname &	Giver	n Name 이름	Gender	성별	Marital Status 결혼여부					
Full Name 성명				☐ Male		☐ Single					
*DI			CC 1 1	☐ Fema		☐ Married		'hoto			
	ume as indicated on your pass	sport c	rt or official aocuments		<u>_</u>						
Date of Birth 생년월일 (YYYY/MM/DD)			Age 나0				Size: 3	cm x 4cm			
Country 국가			Citizenship 국적								
	Address										
Contact Information 연락처	Phone (Must start with the country code)										
*Must be applicant's	E-mail										
	University Name 학교	병			Location (City, Country) 소재국가/도시						
Most Recently Attended University 최종학력	Achieved or Expected Degree 학위		☐ Bachelor's ☐ Master's ☐ Doctoral		Major 전공						
	Degree Thesis Title 최종학위논문제목										
Language Abilities 어학능력	TOPIK Level 한국어능력시험성적		$\Box 1 \ \Box 2 \ \Box 3 \ \Box 4$	□5 □6	7	ish Proficiency Fest Scores 어공인성적	Туре	Score			
Published Papers (If available)											
Awards (If available)											

Choice of University & Major 지원신청대학				Unive	ersity	대학		Division 계열 Department 학과 Major 세부전					r 세부전공						
※ A	Attention									EE uni E univ				ors.					
Cl	hoice #1																		
Cl	hoice #2																		
Cl	hoice #3																		
		Per	iod フ	l간	Uni	versit	y/ Inst	titutio	n 학I	고명	Cou	ntry	소재국 Major 전공				전공	분야	Degree 학위
Previ																			
Achi Degr	ee(s)																		
학	력																		
								I											
GPA*	School Year	1	st yea	r	2	nd yea	ır	3	s rd yea	r	4	th yea	r	4	5 th year Cu		Cumulative GPA		Score Percentile
(ONLY for terms or	Term/ Semester	1	2	3	1	2	3	1	2	3	1	2	3	1	2	3	퍙	ਰਾ ਨ ਰਹਾਤ	환산점수
semesters completed) 성적	Bachelor's	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/			/ 100
o ㄱ (이수 학기만)	Master's	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/			
.,	Doctoral	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/			/ 100
Empl	loyment o	r	Period			Institution/ Company			Position					Resp	oonsibilities				
Profession	onal Rese perience																		
	은 연구	경력																	
Previo	ous Visits	to]	Period				Purpose of Stay			City o			or Region			Affiliated Organization	
	과거 한 주 또는	국																	
	류 사실																		
Previously Receive Scholarship Award				\mathbf{S}_1	ponso	r 지원	린기관			Gran		unt Z D/yea	지원글 ar)	급액			Pe	riod 수혜기	기간
ins	n Korean											/							
장학금 수혜												/							
년(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

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

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

FORM 3. STATEMENT OF PURPOSE

This form is required for applicants in the Master's or Doctoral program ONLY.

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 Plan	
after Study	o Future plan in Korea or another country after study in Korea

FORM 4. RESEARCH PROPOSAL

This form is required for the Research Program applicants ONLY.

Please type in Korean or in English. Please write in as much detail as possible, not exceeding FIVE pages, single-spaced, with the font **Times New Roman**, in size 11. (*11 points)

	Research Topic
]	
	Research Objectives
	Detailed Research Plan
	Research Methodology
	Expected Results of the Research
	Research Timetable

FORM 5. 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

*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!

Position or Title: ______University (Institution): _____

(zip-code:

Recommender's Signature

Email: Tel:

Date____

)

FORM 6. LETTER OF INVITATION

This form is required for the Research Program applicants ONLY and must be completed by the staff or faculty of the inviting university.

	A. Applicant Information								
Full Name									
Nationality		Final Degree							
Current Affiliation		Current Position							
	B. Invit	ation Details							
Period of Invitation		Department							
Professor		(signature)							
Research Plan	* Please briefly describe the applicant's research topic and plan.								
University's Support Plan	Support								
hereby confirm that our university (institution) will invite the above person as a research program scholar under the Korean Government Scholarship Program.									
			Date:						
President	Uni	versity	(Offi	icial Seal)					

FORM 7. GKS APPLICANT AGREEMENT

As an applicant for 2019 Global Korby the following;	rea Scholarship for	· Graduate Degree, I agree to abide
* Please read each article, check each box a	nd sign below.	
(1) The information I have provided documents I submitted to the Nat NIIED) are genuine. □		
(2) I understand that all the documer regardless of the final outcome o		
(3) I will abide by all the Korean law	vs and ordinances.	
(4) I will respect and uphold the valu	ues of the Korean cu	ilture and society.
(5) I will fulfill my responsibilities a	as a GKS scholar to	the best of my abilities. \square
(6) I will not participate in any form political party, attending political organizing or participating in pol	l meetings, publishi	ng articles and declarations, and
(7) I will maintain financial integrity	at a personal level.	
(8) I accept NIIED's decision concertanguage program. □	rning graduate degre	ee, research program and the Korean
(9) I understand that once I am select university, either for the Korean program. □		-
(10)I will abide by the academic reguinstitution, and university. □	ulations and requirer	ments of NIIED, Korean language
Date(yyyy/mm/ dd) A	applicant's Name	(Signature)
		(continued in the next page

•	ny dependents that will accompondents sure extra expenses or support in re	ich as visa issuance and that
contact information provide communication, conducting	try of Justice of Korea, and affi ed in my application for the pur g surveys, and sharing informat d video of me to be taken durin	iliated institutions to use the pose of visa issuance,
necessary by GKS to detern organization or individual is	o verify the information disclose GKS as well as to collect any conine my suitability as an application said information and/or ing recommendation referees or	eant from any institution, documentation. This includes
reasonable efforts will be m	information provided to NIIEI e limited to GKS team and its and to protect confidential and mg my application, I agree to the	affiliates. I understand that all sensitive information. By
(15)I understand that failure to utermination of my scholarsh	•	nents may be grounds for
I confirm that I read all of the a		
Date(yyyy/mm/ dd)	Applicant's Name	(Signature)

FORM 8. 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 Global Korea Scholarship, 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, PLI	EASE EXPLAIN
<i>-</i>	had an infectious diseas ealth (such as, but not li d STDs)?		a			
Do you have all	lergies?					
Do you have hy	per tension?					
Do you have dia	abetes?					
Do you have an	y type of Hepatitis?					
depression, anx disorder? (If yo	suffered from or been to iety, or any other menta u have received treatme ach an official medical r					
Have you ever b	been addicted to alcoho	1?				
	abused any narcotic, sti other substance, either					
Have you been	hospitalized in the last	two (2) years	?			
Have you had a in the last five (ny serious injury, ailme (5) years?	ent or sickness	S			
Do you have an	y visual or hearing imp	eairment?				
Do you have an	y physical disabilities?					
Do you have an	y cognitive/mental disa	ıbilities?				
Are you taking	any prescribed medicat	ion?				
Are you on a sp	pecial diet?					
Are you pregna	nt?					