**FORM 1. Application Form**

**Application Checklist**

**지원자 제출서류 체크리스트**

|  |
| --- |
| REGISTRATION NUMBER |
|  |  |
|  |  |
| \*Leave this table blank |

**Institution Receiving Application (접수기관) :**

**Person in Charge (확인자) : Signature(인)**

1. Name of Applicant: (Surname) (Given Name)
2. Country :

3) Desired Degree Program : [ ]  Master’s [ ]  Doctoral [ ]  Postdoctoral [ ]  Professor Exchange

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

|  |  |
| --- | --- |
| **Application Documents** | **Submission Status** |
| **Yes** | **No** |
| 1 | Application Form (Form 1) |  |  |
| 2 | Letter of Self-Introduction (Form 2) |  |  |
| 3 | Statement of Purpose (Form 3) |  |  |
| 4 | Research Proposal (Form 4) |  |  |
| 5 | TWO Letters of Recommendation (Form 5) |  |  |
| 6 | Letter of Invitation (Form 6) *\* Research Program applicants ONLY* |  |  |
| 7 | KGSP Applicant Pledge (Form 7) |  |  |
| 8 | Personal Medical Assessment (Form 8) |  |  |
| 9 | Bachelor’s Diploma or Certificate of Degree: original copy |  |  |
| 10 | Bachelor’s Transcript: original copy |  |  |
| 11 | Master’s Diploma or Certificate of Degree: original copy |  |  |
| 12 | Master’s Transcript: original copy |  |  |
| 13 | Doctoral Diploma or Certificate of Degree: original copy*\* Post-Doctoral Research Program applicants ONLY* |  |  |
| 14 | Doctoral Transcript: original copy*\* Post-Doctoral Research Program applicants ONLY* |  |  |
| 15 | Certificate of Employment: original copy*\* Research Program applicants ONLY* |  |  |
| 16 | Applicant’s Proof of Citizenship  |  |  |
| 17 | Parents’ Proof of Citizenship |  |  |
| 18 | Certificate of Korean Citizenship Renunciation*\* Previous Korean citizenship holders ONLY* |  |  |
| 19 | Adoption Documents \* *Overseas Korean Adoptees ONLY* |  |  |
| 20 | Certificate of Valid TOPIK |  |  |
| 21 | Certificate of Valid English Proficiency Test |  |  |
| 22 | Published Papers |  |  |
| 23 | Awards |  |  |

**Korean Government Scholarship Program (KGSP)**

**for Graduate Degrees**

**Application Form**

*Please check (*[x] *) the following. Click the box to check or uncheck.*

1. **Application Track 추천기관**

[ ]  Embassy 재외공관 [ ]  University 국내대학

1. **Type of Application 추천유형**

[ ]  General 일반추천 [ ]  Overseas Korean Adoptee 입양인

**3. Desired Field of Study 희망계열**

 [ ]  Liberal Arts and Social Science 인문사회계열

 [ ]  Science, Technology and Engineering 자연공학계열

 [ ]  Arts and Sports 예체능계열

**4. Program to Apply 지원과정**

 [ ]  Master’s 석사과정 [ ]  Doctoral 박사과정

 [ ]  Postdoctoral Research 박사후연구과정 [ ]  Professor Exchange 교환교수 등 연구과정

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

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Full Name성명 | *Surname 성* | *Given Name 이름* | Gender 성별 | Marital Status결혼여부 | PhotoSize: 3cm x 4cm |
| [ ]  Male[ ]  Female | [ ]  Single[ ]  Married |
| ※Write the passport name.  |
| Date of Birth 생년월일(YYYY/MM/DD) |  | Age 나이 |  |
| Country 국가 |  | Citizenship 국적 |  |
| Contact Information 연락처**\*Must be applicant’s** | *Address* |
| *Phone (Must start with the country code)*  |
| *E-mail* |
| Most Recently Attended University 최종학력 | University Name 학교명 |  | Location (City, Country) 소재국가/도시 |  |
| Achieved or Expected Degree 학위 | [ ]  Bachelor’s[ ]  Master’s[ ]  Doctoral | Major 전공 |  |
| Degree Thesis Title 최종학위논문제목 |  |
| Language Abilities 어학능력 | TOPIK Level | [ ] 1 [ ] 2 [ ] 3 [ ] 4 [ ] 5 [ ] 6 | English Proficiency Test Scores영어공인성적 | *Type* | *Score* |
| Published Papers (If available) |  |
| Awards(If available) |  |
| Choice of University/ Major 지원신청대학 | University 대학 | Division 계열 | Department 학과 | Major 세부전공 |
| ※ ***Attention!*** Embassy Track applicants must choose THREE universities and majors.  University Track applicants must choose ONE university and major.  |
| Choice #1 |  |  |  |  |
| Choice #2 |  |  |  |  |
| Choice #3 |  |  |  |  |
| Previously Achieved Degree(s)학력 | Period 기간 | University/ Institution 학교명 | Country 소재국 | Major 전공분야 | 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 | / | / | / | / | / | / | / | / | / | / | / | / | / | / | / |  |  |
| Doctoral | / | / | / | / | / | / | / | / | / | / | / | / | / | / | / |  | / 100 |
| Employment or Professional Research Experience직업 혹은 연구경력 | Period | Institution/ Company | Position | Responsibilities |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| Previous Visits to Korea 과거 한국 거주 또는체류 사실 | Period | Purpose of Stay | City or Region | Affiliated Organization |
|  |  |  |  |
|  |  |  |  |
| Previously Received Scholarship Awards from Korean institutions장학금 수혜 | Sponsor 지원기관 | Grant Amount 지원금액(USD/year) | Period 수혜기간 |
|  | / |  |
|  | / |  |
| 년(yyyy) 월(mm) 일(dd)Applicant's Name : (signature) |

\* GPA(Grade Point Average) must be converted to percentile scores. Refer to the Appendix A for the conversion table.

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

\* Research Program applicants must to grades for their final degrees.

**FORM 2. Letter of Self-Introduction**

*Please type in Korean or in English. The letter must be single spaced within ONE page, with the font* ***Times New Roman****, size 10. (\*10 points)*

|  |
| --- |
| oYour course of life, your view of life, study background, your hopes & wishes, etc o Your education and work experience, etc., in relation to the KGSP program o Your motivations for applying for this program o Reason for study in Korea |

**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 10. (\*10 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. 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 10. (\*10 points)*

|  |
| --- |
| ▣ Research Topic |
|  |
| ▣ Research Objectives |
|  |
| ▣ Detailed Research Plan |
|  |
| ▣ Research Methodology |
|  |
| ▣ Expected Results of the Research |
|  |
| ▣ Research Timetable |
|  |

**FORM 5. Letter of Recommendation**

**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 Program: [ ]  Master’s [ ]  Doctoral [ ]  Postdoctoral [ ]  Professor Exchange

Desired Major:

**To the recommender**: The person named above has applied for the ‘Korean Government Scholarship Program’. We ask for your assistance, and would appreciate your frank and candid appraisal of the applicant.

*\** ***Please type or print clearly using black ink****.*

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

Please assess the applicant's qualities in the evaluation table given below. Rate the applicant compared to other classmates who are/were in the same school year with him/her.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Classification | Truly Exceptional | Excellent | Very Good | Good | Below Average | N/A |
| Top 2% | Top 10% | Top 25% | Middle 50% | Lower 25% |
| Academic Achievement |  |  |  |  |  |  |
| Future Academic Potential |  |  |  |  |  |  |
| Integrity |  |  |  |  |  |  |
| Responsibility/Independence |  |  |  |  |  |  |
| Creativity/Originality |  |  |  |  |  |  |
| Communication Skills |  |  |  |  |  |  |
| Interpersonal skills |  |  |  |  |  |  |
| Leadership  |  |  |  |  |  |  |

1. What do you consider to be the applicant’s strengths?

2. What do you consider to be the applicant’s weaknesses?

3. How well do you think the applicant has thought out plans for graduate study?

4. Please comment on the applicant’s performancerecord, potential, or personal qualities which you believe would be helpful in considering the applicant’s application for the proposed degree program.

Recommender’s Name Date

Recommender’s Signature

Position or Title:

University (Institution):

Address:

(zip-code: - )

Tel: Fax:

**Please return this form sealed in an official envelope and signed across the back to the applicant. We greatly appreciate your timeliness regarding this letter for your recommendee.**

**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. Invitation Details** |
| Period of Invitation |  | Department |  |
| Professor |  | (signature) |  |
| Research Plan | *\* Please briefly describe the applicant’s research topic and plan.* |
| University’s SupportPlan | 1. Please check all that applies:[ ]  Participation in our university’s research project;[ ]  Support for coursework, as in auditing a course;[ ]  Personal research office[ ]  Access to the university’s library[ ]  Financial support for attending academic conferences[ ]  On-campus accommodation[ ]  Other |
| 2. University Support Details |

I hereby confirm that our university(institution) will invite the above person as a research program scholar under the Korean Government Scholarship Program.

Date: February 1, 2017

 *(Official Seal)*

President University

**FORM 7. KGSP Applicant Pledge**

|  |
| --- |
| **Pledge**As an applicant for the 2017 Korean Government Scholarship Program (KGSP) for Graduate Degrees, I pledge to abide by the followings**:**(1) All documents I submitted to NIIED are true; (2) I will fulfill my responsibilities as a KGSP scholar to the best of my ability; (3) I will respect and uphold the values of the Korean culture and society; (4) I will not participate in any form of political activities (such as organizing or joining a political party, attending political meetings, publishing political articles and declarations, and organizing or participating in political demonstrations); (5) I will maintain financial integrity at a personal level; (6) I accept NIIED's decision concerning the graduate degree program and the Korean language program; (7) I understand it is not permitted to change the university, either for the Korean language program or for the degree program;(8) I will observe the regulations of NIIED and university; and(9) I give permission to NIIED to use my personal information for KGSP.I confirm that I read the above conditions. I also understand that the violation of any one of the above might result in the suspension or cancellation of the scholarship. Date (YYYY/ MM/ DD): Applicant’s Name : (signature) |

**FORM 8. PERSONAL MEDICAL ASSESSMENT**

***Attention!*** Applicants are not required to undergo an authorized medical exam before passing the 2nd Selection with NIIED. The successful candidates of the 2nd round of selection, however, must get the comprehensive medical examinations from a licensed physician or a doctor (including an HIV and TBPE drug test\*\*, etc) in accordance with the requirements of the Korea Immigration Service and the KGSP. If the results show that the applicant is unfit to study and live overseas more than 3 years, he/she may be disqualified.

\*\*The TBPE (tetrabromophenolphthalein ethyl ester) drug tests are for evaluating past usage of stimulant drugs.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 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, HIV and other 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? |  |  |  |