2023 GLOBAL KOREAS CHOLARSHIP

Graduate Degree Program

Application Checklist

	□ Embassy Track (공관전형)□ University Track (대학전형)
Name of Institution Receiving Application (공관/대학명): _	
Applicant's Full Name(성명) :(<u>Family, Given, Middle)</u>	
Country of Citizenship(국가):	

Checklist (List of Documents to Submit) Click the $box(\Box)$ to check or uncheck.

Туре	No.	Application Documents	Master's	Doctoral	Research	Check
	1	(form 1) Application Form	Required	Required	Required	
	2	(form 2) Personal Statement	Required	Required	Required	
	3	(form 3) Study Plan	Required	Required		
Documents	4	(form 4) Research Proposal (only applicable for research program applicants)			Required	
to complete	5	(form 5) ONE Letter of Recommendation	Required	Required	Required	
(Required)	6	(form 6) Letter of Invitation (issued by the research program university)			Required	
	7	(form 7) GKS Applicant Agreement	Required	Required	Required	
	8	(form 8) Personal Medical Assessment	Required	Required	Required	
	9	(form 9) Consent to Collect and Use Personal Information	Required	Required	Required	
	10	Applicant's/Parent(s)' Proof of Citizenship and family relationship Document	Required	Required	Required	
	11	Bachelor's Graduation Certificate (or Diploma)	Required	Required	Required	
	11'	Bachelor's Degree Transcript	Required	Required	Required	
	12	Master's Graduation Certificate (or Diploma)		Required	Required	
Certificates	12'	Master's Degree Transcript		Required	Required	
(Required)	13	Doctoral Graduation Certificate (or Diploma)			Required	
Must be	15	- only applicable for postdoctoral research program applicants			required	
Apostilled	13'	Doctoral Degree Transcript - only applicable for postdoctoral research program applicants			Required	
or Consular confirmed	14	Certificate of Employment - only applicable for E.S.C.I. professionals under research program			Required	
	15*	Proof of Overseas Korean Document/Proof of Korean Adoptee Document	Optional	Optional	Optional	
Required for relevant	16	Proof of Korean Citizenship Renunciation Document - applicant and his/her parent(s)	Optional	Optional	Optional	
applicants	17*	Proof of Korean War Veteran's Descendant	Optional	Optional	Optional	
	18*	Required Certificates for Current Teaching Professionals 1) Certificate of Employment (teaching subject clearly indicated) 2) Certificate of Teaching Experience (years taught specified)	Optional	Optional		
	19*	Required Certificates for Prospective Teaching Professionals 1) Certificate that confirms completion of a teaching professionals training course (classes taken should be specified) or Teaching License	Optional	Optional		
Other	20	Score report of valid TOPIK (original) or English Proficiency Test (copy)	Optional	Optional	Optional	
documents	21	Awards and other certificates, etc. (copy)	Optional	Optional	Optional	

(Optional)	22	Applicant's Passport (copy)	Optional	Optional	Optional	

FORM 1. 2023 Global Korea Scholarship Application

Items marked in the **red box**are **required** for all applicants.Delete all pink-colored examples before submitting the application. All information must be typed in **English** ONLY.

1.	Application	Track and	Application	Program	지원전형및프로그램
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Track	Program
EmbassyTrack	Select only ONE program
	□General 일반□Overseas Korean재외동포□Teaching Professional 교원□Research연구
UniversityTrack	Select only ONE program
	□General 일반□Regional 지방대□R&D 연구개발□Research 연구

2. Degree Programto Apply 지원학위과정

Select only ONE program
□Master's Degree석사□Doctoral Degree 박사□Research 연구

3. Desired Field of Study (Division)희망계열*Please refer to the "University Information" file

You can select multiple fields	<u> </u>
□ Liberal Arts 인문□ Social Science 사회□Natural Science 자연과학	
□ Arts and Sports 예체능□ Education 교육□Medicine의학	
□Engineering 공학□Artificial Intelligence (AI)인공지능	

4. Information of the Applicant 지원자정보

	Family Name 성				
Full Name 성명	Given Name O/름	Photo			
	Middle Name 중간이름	Size: 3cm x 4 cm			
*Please write your full n	증명사진				
Date of Birth 생년월일	(YYYY-MM-DD) e.g., 1990-03-27	Gende	Gender 성별 □Male□Female		3 8 6 7 12
Countryof					
Korean Citizenship 한국국적여부	Applicant □Yes □No		Applicant's l	Parent(s) □Yes□No your parents has Korean Citizenship, ch	eck 'YES')

Current or p	revious	GKS so	chola	ar 기존 GKS 장희	 남생재지원		lo □Yes (selecte	d year: /d	legree achieve	d:)
_			dress								
Contact Information지원자본											
		1 110	Phone (start with the country code) e.g., +82-2-00-0000								
*Must be ap		7	nail								
5. Choice	of Un	iversit	tv ar	nd Department	지원대한민	 한과					
			•	•						a.	
	mbassy om Type			cants can choose up	p to THREE (different i	universities in any	order of pref	erence. Howe	ver, Ch	oice I must be
• F	ield of S	Study (L	Divisi	ion)and Departmen	it should matc	h the info	rmation provided	in the "Unive	ersity Informa	tion" fil	le
				University 대	하	Field of	Study(Division)	Departm	ㅎ. 고	Otl	ner (i.e., major) (optional)
				University 🗀	Ť		계열	Departin	ieni = 47	기티	·(세부전공등)
	Choic		уре В	3		e.g.,	Liberal Arts				
		T	уре А	or B							
Embassy Track	Choic	ee 2									
TTACK	Choic		уре А	or B							
		T	vpe A	or B							
☐ Univer	sity Tra		V F -								
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6. Langu	aga Ah	vilitios	014	하늦렴							
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TOP 한국어능	IK Leve				ate (회차/시험	English Profic 엄일) Score		es 🗆 TOE			
<u> </u>	7/10	107	e.g., 78 th , 2021-10-16			영어공인시	l험성적				
				0.g., 10 , 2	2021 10-10				L IELIS		
7. Level	of Educ	cation	하랻	정보							
High S	School 1	Progra	am (Required for all	applicants)						
		High S	Scho	ol Name 학교명							
High School 고등학교		Locati	ion (Country) 소재국							
		Y	Yearof Graduation								
			졸	업연도							
Bachel	lor'sDe	egree (Req	uired for all app	licants)						
Universi	ity	Unive	ersity	y Name 학교명							
대학		Locati	ion (Country) 소재국							

	Major 전공	
	Graduation date or Degree awarded date 졸업일또는학위수여일	Date indicated in your graduation (degree) certificate or diploma (YYYY-MM-DD)
Degree Thesis Title	(If available)	
Published books & research papers	(If available)	

Master's Degree (Required for Doctoral and Research program applicants)

	University Name 학교명					
	Location (Country) 소재국					
University 대학	Major 전공					
'	Graduation date or Degree awarded date 졸업일또는학위수여일	Date indicated in your graduation (degree) certificate or diploma (YYYY-MM-DD)				
Degree Thesis Title	(If available)					
Published books & research papers	(If available)					

Doctoral Degree (Required for PostdoctoralResearch program applicants)

University	University Name 학교명						
	Location (Country) 소재국						
대학	Major 전공						
	Graduation date	Date indicated in your graduation (degree) certificate or diploma					
	or Degree awarded date	(YYYY-MM-DD)					
	졸업일또는학위수여일						
Dissertation Title	(If available)						
Published books	(If available)	(If mailable)					
& research papers	(i) avanable)						

8. Cumulative GPA (CGPA) of the previous degree^{*} program직전학위종합평균평점

* For example, the previous degree program of a doctoral degree program applicant is master's degree program

CGPA 전체평균평점	Converted CGPA 변환성적** (in 4.0, 4.3, 4.5, 5.0, or 100 scale only)	Score Percentile 백분율환산점수
CGPA indicated on your original transcript Highlight the CGPA on your transcript	Required for relevant applicants. Must be confirmed by the university	If your transcript does not have score percentile, refer to Appendix A. GPA Conversion Table to convert your CGPA into 100 points scale
e.g., 18.3/20	e.g., 3.9/4.3, 92/100	/100
If the transcript does not indicate the grading scale, submit a supplementary document describing the university's grading system		

^{**} If your CGPA does not belong to any of the GPA scales we accept (4.0, 4.3, 4.5, 5.0 or 100 point scale), provide your original CGPA and a converted CGPA.

It is required to submit a supplementary document issued by the relevant university that supports your converted grade.

GPA indicated on the academic transcript of the previous degree program 직전학위성적표상표기된학기/학년별평점

Year	1 st y	year	2 nd	ad year 3 rd year 4 th year * If needed, you may modify of		year 4 th year		ay modify columns		
Semester /Term	1	2	1	2	1	2	1	2		
Grades or Rank	17/20	/	/	/	/	/	/	/		

^{*}If your academic transcript only indicates CGPA and does not provide GPA per semester, then you may leave this table empty.

9. Previously Received Scholarship from Korean Government or Institutions (if any) 한국장학금수혜사실(해당자만)

Sponsor 지원기관	Name of the Scholarship 장학금명	Period 수혜기간
e.g., NIIED	e.g., GKS Non-degree program for foreign exchange students	e.g., 2020.March~July

10. Previous Visits to Korea or Currently Residing in Korea (if any) 한국방문혹은체류정보(해당자만기재)

Period 방문/체류기간	Purpose of Stay 방문/체류목적	City/Region 도시/지역	Affiliated Organization (if any) 방문/체류기관(해당자만)	Visa Type 비자종류
e.g., 2020.July~August	e.g., Korean language study	e.g., Seoul	e.g., ABC University	e.g., D-4

^{*} Please put your visa type especially if you are currently residing in Korea.

THE ANSWERS I HAVE GIVEN ABOVE ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE. IF MY ANSWERS CONTAIN ANY KIND OF FALSEHOOD, I WILL TAKE ANY LEGAL RESPONSIBILITY.

Date(yyyy-mm-dd)Applicant's FullNameSignature

FORM 2. PERSONAL STATEMENT

Instructions: Please type in Korean or in English. The essay must be single spaced within THREEpages, with the font Times New Roman/바탕체/돌옵체, size 11 (11 points). You can include the following items in your essay. Please delete the instructions before submitting the application.

- Motivations with which you apply for this program
- Educational background
- Significant experiences you have had
- Person or events that have had a significant influence on you
- If applicable, describe awards you have received, publications you have made, or skills you have acquired, etc.
- Others (e.g., extracurricular activities, community service, or work experiences)
- X It is recommended to submit a supplementary document that can prove what you have described in this personal statement. Please number each document and submit them as "other documents". Other documents can be submitted in simple photocopies without authentication

Date(yyyy-mm-dd)Applicant's FullNameSignature
FORM 3. STUDY PLAN
Instructions: Please type in Korean or in English. The essay must be single spaced within THREE pages, with the font Times
New Roman/바탕체/돌움체, size 11 (11 points). Please include the following items in your essay. Please delete the
instructions before submitting the application. Language Study Plan (Study plans to improve Korean/English language ability required for taking a degree course
before and after you come to Korea) Goal of study & Study Plan (Goal of study and detailed study plan)
■ Future Plan after Study (Future plan in Korea or another country after finishing GKS program

Deta(
Date(yyyy-mm-dd)Applicant's FullNameSignature
FORM 4. RESEARCH PROPOSAL
Instructions: This form is required for the research program applicants only. Please type in Korean or in English. The essay
must be single spaced within THREE pages, with the font Times New Roman/바탕체/돌움체, size 11 (11 points). Please
include the following items in your proposal. Please delete the instructions before submitting the application.
■ Research Topic ■ Research Objectives
Detailed Research PlanResearch Methodology
Research MethodologyExpected Result of the Research
■ Research Timetable

Date(yyyy-mm-dd)Applicant's Full NameSignature
FORM 5. RECOMMENDATION LETTER
Instructions for applicants: fill in Section 1 and deliver (or email) this form to your recommender
SECTION 1: To be completed by applicant
■ Applicant's Name:
 ■ Program applying for: ☐ Master's degree ☐ Doctoral degree ☐ Research ■ Intended Major:
- intended Major.
SECTION 2: To be completed by your recommender
Instructions for the recommenders (you can delete this instruction):
Your 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.
Please write in English or Korean and the letter below or use your own recommendation letter template and attach your letter to this form. The letter should be no more than two pages in length.
We expect your letter can be used to evaluate the applicant's personal qualities, such as: - Ability to work independently or in a team
- Intelligence - Aptitude and attitude
- Potential
- Future contribution - Cultural adaptation
Recommender's Name:
Affiliated Institution:
■ Position/Title: ■ Email:
■ Phone:
■ Please type the recommendation below:

(delete this instruction)

After completing the recommendation letter, please add the date and your signature at the bottom. Please return the completed letter back to the applicant in a sealed envelope. (sign across the back flap). Recommendation letters that are not dated, signed, or sealed are not accepted.

Embassy Track Applicants should submit 4 sets of applications for their screening. If the applicant you are recommending is an embassy track applicant, please make three additional copies of your letter and sign all four letters respectively. Please enclose all four letters and this form altogether in an envelope and sign across the back flap before returning it back to the applicant.

Recommender's SignatureDate

FORM 6. LETTER OF INVITATION

Instructions: This form is required for the research program applicants only and must be completed by the staff or faculty of the inviting university. Letter of Invitation already completed on the previous (2022) form will be accepted in 2023 GKS-G

A. Applicant Information

- Full Name:
- Nationality:
- Final Degree:
- Current Affiliation:

		Current Position:	
В.	Inv	itation Details	
		Period of Invitation: □6 months □1 year	
		Department:	
		Professor:	(signature)
		Research Plan (Please briefly describe the applicant's resear	ch topic and plan):
		University's Support Plan	
		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	1
		☐ 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 GKS Program.

Date(yyyy-mm-dd):

President (Signature)University(Official Seal)

FORM 7. GKS APPLICANT AGREEMENT

As an applicant for Global Korea Scholarship program, I agree to abide by the following;

l.	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. \Box
2.	I understand that all the documents submitted to NIIED for GKS will not be returned regardless of the final
	outcome of the selection process. \square
3.	I will abide by all the Korean laws and ordinances. \Box
4.	I will respect and uphold the values of the Korean culture and society. \Box
5.	I will fulfill my responsibilities as a GKS scholar to the best of my abilities. \Box
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). \square
7.	I will maintain financial integrity at a personal level. \Box
8.	I accept NIIED's decision concerning the degree program and the Korean language program. \Box
9.	I understand that once I am selected as a GKS scholar. I am not permitted to change the university, either for
	the Korean language program. \square
10.	I will abide by the academic regulations and requirements of NIIED, Korean language institution, and
	university. \square
11.	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 regarding my dependents. \square
12.	I hereby authorize NIIED to verify the information disclosed in this application form and the documents
	required by GKS as well as to collect any other information deemed necessary by GKS to determine my
	suitability as an applicant from any institution, organization or individual issuing said information and/or
1.2	documentation. This includes but is not limited to contacting recommenders or previous employers.
13.	I hereby understand that all information provided to NIIED will be stored in secured servers where access

will be limited to GKS team and its affiliates. I understand that confidential and sensitive information. By signing below and sterms.			-
14. I understand that failure to uphold any of the above statements scholarship offer. $\hfill\Box$	may be g	rounds f	for termination of my
I confirm that I read all of the above conditions. I also understand the might result in warning or cancellation of the scholarship.	at the vi	olation (of any one of the above
Date(yyyy-mm-dd)Applicant's Full NameSignature FORM 8. PERSONAL MEDIC	AL A	ASSI	ESSMENT
Instructions: This form is just a personal medical assessment and applicants a examination at this stage	lo not need	d to obta	in a comprehensive medical
-			
	Yes	No	If Yes, please explain
Question 1. Have you ever had an infectious disease that posed a risk to	Yes	No	If Yes, please explain
Question			If Yes, please explain
Question 1. Have you ever had an infectious disease that posed a risk to public health? (e.g. tuberculosis) 2. Do you have allergies?			If Yes, please explain
Question 1. Have you ever had an infectious disease that posed a risk to public health? (e.g. tuberculosis)			If Yes, please explain
Question 1. Have you ever had an infectious disease that posed a risk to public health? (e.g. tuberculosis) 2. Do you have allergies? 3. Do you have hyper tension?			If Yes, please explain
Question 1. Have you ever had an infectious disease that posed a risk to public health? (e.g. tuberculosis) 2. Do you have allergies? 3. Do you have hyper tension? 4. Do you have diabetes?			If Yes, please explain
Question 1. Have you ever had an infectious disease that posed a risk to public health? (e.g. tuberculosis) 2. Do you have allergies? 3. Do you have hyper tension? 4. Do you have diabetes? 5. Do you have any type of Hepatitis? 6. 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			If Yes, please explain
Question 1. Have you ever had an infectious disease that posed a risk to public health? (e.g. tuberculosis) 2. Do you have allergies? 3. Do you have hyper tension? 4. Do you have diabetes? 5. Do you have any type of Hepatitis? 6. 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.)			If Yes, please explain
Question 1. Have you ever had an infectious disease that posed a risk to public health? (e.g. tuberculosis) 2. Do you have allergies? 3. Do you have hyper tension? 4. Do you have diabetes? 5. Do you have any type of Hepatitis? 6. 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.) 7. Have you ever been addicted to alcohol? 8. Have you ever abused any narcotic, stimulant, hallucinogen or			If Yes, please explain
Question 1. Have you ever had an infectious disease that posed a risk to public health? (e.g. tuberculosis) 2. Do you have allergies? 3. Do you have hyper tension? 4. Do you have diabetes? 5. Do you have any type of Hepatitis? 6. 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.) 7. Have you ever been addicted to alcohol? 8. Have you ever abused any narcotic, stimulant, hallucinogen or other substance, either legally or illegally?			If Yes, please explain
Question 1. Have you ever had an infectious disease that posed a risk to public health? (e.g. tuberculosis) 2. Do you have allergies? 3. Do you have hyper tension? 4. Do you have diabetes? 5. Do you have any type of Hepatitis? 6. 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.) 7. Have you ever been addicted to alcohol? 8. Have you ever abused any narcotic, stimulant, hallucinogen or other substance, either legally or illegally? 9. Have you been hospitalized in the last two (2) years? 10. Have you had any serious injury, ailment or sickness in the			If Yes, please explain
Question 1. Have you ever had an infectious disease that posed a risk to public health? (e.g. tuberculosis) 2. Do you have allergies? 3. Do you have hyper tension? 4. Do you have diabetes? 5. Do you have any type of Hepatitis? 6. 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.) 7. Have you ever been addicted to alcohol? 8. Have you ever abused any narcotic, stimulant, hallucinogen or other substance, either legally or illegally? 9. Have you been hospitalized in the last two (2) years? 10. Have you had any serious injury, ailment or sickness in the last five (5) years?			If Yes, please explain

14. Are you taking any prescribed medication?

15. Are you on a special diet?

FORM 9. CONSENT TO COLLECT AND USE PERSONAL INFORMATION

- A. Any information used for identifying individuals that is acquired by NIIED will be stored, used and/or analyzed only within the scope of NIIED activities, and in accordance with NIIED's policy and regulations.
- B. NIIED may provide and disclose the collected information aforesaid to a third party in accordance with NIIED's policy and regulations, with the relevant laws of Korea, or upon the request from the Government of Korea.
- C. NIIED reserves the right to use all the documents or products produced by participants for the purpose of the GKS Program including their duplication, translation, distribution, and/or posting on websites (NIIED's website and/or other websites related to Korean ODA).
- D. NIIED takes measures required to prevent leakage, loss, or destruction of acquired information.
- E. You have a right for refusal to agree with the above conditions, however, please be informed that there may be limitations to your participation to the NIIEDGKS Program.

■ Agreement on Collection and Use of Personal Data

According to Article 15 of the Personal Information Protect Act of Korea, NIIED collects and uses the participants' Personal Information in accordance with NIIED policy and regulations.

Personal Information Collected	Purpose	Retention Period
Name, date of birth, gender, nationality, phone number, e-mail address, home address, TOPIK level, TOPIK level acquisition date, university, language institution, academic records, degree, department, major, field of study, start date and end date of scholarship period, current	Candidate review and selection for the GKS program, Implementation and promotion of the GKS Program, Management* of GKS scholars and alumni	20 years (soft copy)
country of residence, employment status (job category, relation to Korea, workplace information, relation to major), previous degree	* identification of participants, record keeping, supporting NIIED's activities, on/offline alumni database management, operation of alumni website, etc.	5 year (hard copy)

Ж	You may refuse to agree for the collection and use	of your personal information, ho	owever, it may le	ead to limited support	from NIIED
	regarding visa issuance, immigration management	flight and accommodation arrang	gement, insurance	ce and medical service	e.

		TO: 1	-
Agree	1 1	Disagreel	

■ Agreement on Provision of Personal Information to a Third Party

According to Article 17 of the Personal Information Protect Act of Korea, NIIED collects and uses the participants' Personal Information; and is able to provide such information for a third party in accordance with NIIED policy and regulations.

Personal Info	ormation Collected	Purpose	Third Parties	Retention Period

Name, date of birth, gender, nationality,
phone number, e-mail address, home address,
TOPIK level, TOPIK level acquisition date,
university, language institution, academic
records, degree, department, major, field of
study, start date and end date of scholarship
1 2
period, current country of residence,
employment status (job category, relation to
Korea, workplace information, relation to
major), previous degree

Management of student information, Visa issuance, Implementation and promotion of the GKS program, Alumni activity support and alumni database management (including newsletter service), Strengthening partnerships between Korea and partner countries

Prime Minister's Office, Ministry of Foreign Affairs and its Overseas Missions, Ministry of Education, Ministry of Science & ICT, Ministry of Culture, Sports & Tourism and Korean Culture & Information Service, Ministry of Personnel Management, GKS universities, etc.

20 years (soft copy) / 5 year (hard copy)

Ж	You may refuse to agree for the provision of your personal information to a third party, however, it may lead to limited support from
	NIIED's service including alumni activities

Agree □ Disagree□

Date(yyyy-mm-dd)Applicant's Full NameSignature