

Application Guidelines

In completing the attached application form, please be advised to:

- a. Carefully read your Course Information (CI) prior to completing the application form;
- b. Use a personal computer in completing the form, or handwrite in **block letters**;
- c. Fill in the form in **English**;
- d. Be sure to fill in **every part** of the form;
- e. Send the completed form to your country's KOICA Office - or the Embassy of Korea stationed in your nearest country if the former is not available- together with a **copy of your passport**; and
- f. Be reminded that your participation may be denied if you fail to provide the required information and documents completely and on time.

Application Checklist

Items	Page No.	Check(✓) if completed
a. Filled in every item of Applicant Information	3-5	
b. Ticked agree/disagree box for Agreement on Collection and Use Personal, Sensitive, and Unique Identifying Information	6-7	
c. Ticked agree/disagree box for Agreement on Sexual Harassment Policy	8	
d. Signed the declaration for terms and conditions	9	
e. Signed and filled in every part of Medical Report 1	10	
f. Had an authorized physician to complete and sign Medical Report 2	-	-
g. Had an authorized official from your government to complete and sign the Nomination form	12-13	
h. Have a copy of passport ready for submission	-	
i. Read the Instructions regarding the Novel Coronavirus Disease (COVID-19) Infection	2	

This is to certify that I have completed every part of the application form to apply for the KOICA Fellowship Program.

Date: _____ Applicant's Name: _____ Signature: _____

※ **Instructions regarding the Novel Coronavirus Disease (COVID-19)** ※

- **(When applying for the training program) Candidates are not recommended to apply** for the program if they show symptoms such as **fever and coughing**.
 - Those symptoms are related to the COVID-19 virus, so those having such symptoms are advised not to apply for the program for their own safety.

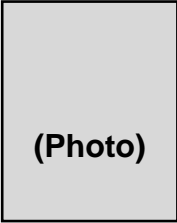
- **(After being selected)** Successful candidates are advised to refrain from visiting China within 14 days prior to their departure.
 - In particular, foreigners who have visited or stayed in Hubei Province, China within 14 days prior to departure are banned from entering Korea, according to the government policy.

- **(When receiving onsite pre-orientation)** During the onsite pre-orientation, KOICA Regional Office or Korean Embassy is to conduct 1) behavioral education to prevent infectious diseases as well as 2) testing participants' body temperature.
 - If a body temperature exceeds 37.5°C, he or she will be recommended not to participate in the Program.
 - If the pre-orientation is not conducted, self-testing should be made (If a body temperature exceeds 37.5°C, he or she must report it to KOICA Regional Office or Korean Embassy.)

- **(When entering Korea)** Fever test is being carried out through the thermal camera in Incheon International Airport.
 - In case a person is detected to have fever above 37.5°C, the person should move to a novel coronavirus screening clinic for testing. If the test shows a virus infection, the person will be quarantined and thus can not join the Program.

Application Form for the KOICA Fellowship Program

This form is to be used to apply for the Fellowship Program of the Korea International Cooperation Agency (KOICA), which is implemented as part of the Official Development Assistance Program of the Government of Korea. Please complete the application form and consult with your respective country's KOICA Office - or the Embassy of Korea in charge of your country, if the former is not available - for further information.



PART. 1. APPLICANT INFORMATION (to be completed by the applicant)

I. PROGRAM OF APPLICATION (as in the Course Information)

Program Title	
Course Title	
Course Duration	from _____ to _____ (DD-MM-YYYY)

II. PERSONAL DATA

Name (as in the passport)	First Name																								
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Date of Birth	Day		Month		Year																				
Sex	<input type="checkbox"/> M <input type="checkbox"/> F		Airport of Departure																						
Nationality			Religion																						
Home Address																									
Contact Information (Including Country Code)	Telephone			Fax																					
	Mobile			E-mail																					
Emergency Contact	Name			Relation																					
	Telephone			E-mail																					
Emergency Contact (2)	Name			Relation																					
	Telephone			E-mail																					

III. CURRENT EMPLOYMENT

Organization					
Department					
Present Position			Employment Duration	from _____ to present (MM-YYYY)	
Type of Organization	Government	<input type="checkbox"/> Central <input type="checkbox"/> Local			
	Institution	<input type="checkbox"/> Public <input type="checkbox"/> Private <input type="checkbox"/> International <input type="checkbox"/> NGO			

	Others	(Please specify)
Job Description	Describe your main duties. Specify any technical equipment or facilities you work on with if applicable.	
	Describe any themes, topics and places of interest you would like to see in the Course related to your tasks mentioned aforesaid.	
	Elaborate on organizational setback or challenges that you wish to address through the Course.	
Elaborate on your plans to apply the lessons learned from the Course to your organization.		

VI. CAREER RECORD

Career Background (Past 5 Years)				
Organization	Department	Position / Responsibilities	Period (MM-YYYY)	
			From	To
Educational Background (Higher Education)				
Name of Institution	City / Country	Field of Study and Degree	Period (MM-YYYY)	
			From	To

PART. 2. TERMS & CONDITIONS

Applicants should read, abide by, and respect the following terms and conditions. Failure to abide by the followings may result in dismissal from the program and report to applicant's government and /or employer.

I. PRIVACY & COPYRIGHT POLICY

- a. Any information used for identifying individuals that is acquired by KOICA will be stored, used and/or analyzed only within the scope of KOICA activities, and in accordance with KOICA policy and regulations.
- b. KOICA may provide and disclose the collected information aforesaid to a third party in accordance with KOICA policy and regulations, with the relevant laws of Korea, or upon the request from the Government of Korea.
- c. KOICA reserves the right to use all the documents or products produced by participants for the purpose of the Fellowship Program (e.g. country report, action plan, thesis, essay, etc.) including their duplication, translation, distribution, and/or posting on websites (KOICA website and/or other websites related to Korean ODA).
- d. KOICA takes measures required to prevent leakage, loss, or destruction of acquired information. Should you wish to inquire further about KOICA's privacy policy and personal information management, please contact the program manager via the contact information provided in your Course Information (CI), or send an email to ciat@koica.go.kr.
- e. If you do not approve of the above conditions, you may also refuse to agree. However, please be informed that there may be limitations to your participation to the KOICA Fellowship Program if you do not agree with the above conditions.

Agreement on Collection and Use of Personal Information

- ① KOICA collects and uses the participants' Unique Identifying Information; and is able to provide such information for a third party in accordance with KOICA policy and regulations.
 - **Personal Information Collected** : name, date of birth, sex, nationality, contact information, employment status, career and educational record
 - **Purpose** : implementation and promotion of the KOICA Fellowship Program, identification of participants, record keeping, supporting KOICA Club activities, and strengthening the partnership between Korea and Partner Countries
 - **Retention Period** : 3 years for hard copy / permanent preservation for soft copy
- ② If you do not approve our collection and use of your personal information, you may also refuse to agree. However, you may have limited support from KOICA regarding visa issuance, immigration management, flight and accommodation arrangement, KOICA Club activities, insurance and medical service.

Agree

 Disagree

Agreement on Collection and Use of Sensitive Information

- ① KOICA collects and uses the participants' Sensitive Information; and is able to provide such information for a third party in accordance with KOICA policy and regulations.
- **Sensitive Information Collected** : religion, medical information
 - **Purpose** : implementation and organization of the KOICA Fellowship Program in consideration of participants' religious characteristics, screening of participants' health condition to participate in KOICA Fellowship Program, insurance and medical service
 - **Retention Period** : 3 years for hard copy / permanent preservation for soft copy
- ② If you do not approve our collection and use of your sensitive information, you may also refuse to agree. However, you may have limited support from KOICA regarding your religious activities and requirements, insurance and medical service.

Agree **Disagree**

Agreement on Collection and Use of Unique Identifying Information

- ① KOICA collects and uses the participants' Unique Identifying Information; and is able to provide such information for a third party in accordance with KOICA policy and regulations.
- **Unique Identifying Information Collected** : passport number, alien registration number
 - **Purpose** : visa issuance, immigration management, flight and accommodation arrangement, insurance and medical service
 - **Retention Period** : 5 days after the accomplishment of the purpose specified above
- ② If you do not approve our collection and use of your unique identifying information, you may also refuse to agree. However, you may have limited support from KOICA regarding visa issuance, immigration management, flight and accommodation arrangement, insurance and medical service.

Agree **Disagree**

II. POLICY ON SEXUAL HARASSMENT

- a. Sexual harassment, defined as a form of behavior characterized by sexually connotative words, acts or gestures that could undermine individual dignity and by which the victim takes offense, is regarded as a serious misconduct and will be dealt with accordingly.
- b. Once a sexual harassment case is filed, it is proceeded either to a review with the Program Manager, or to a review by KOICA Advisory Board. Sexual harassment cases may result in serious repercussions including 1) dismissal from the Program, 2) report to the pertinent embassy and/or government, 3) civil and criminal lawsuits and penalties.
- c. Participants are encouraged to file a complaint in accordance with KOICA's complaint procedure, when they feel that they are sexually harassed.

Agreement on Sexual Harassment Policy

- ① I fully understand and agree to abide by KOICA's policy on sexual harassment.
- ② I understand the definition of sexual harassment as clarified above, and will not engage in any behavior that may be regarded as sexual harassment.
- ③ I understand that there are serious repercussions to engagement in sexual harassment cases.
- ④ I understand that I can file a complaint in accordance with KOICA's complaint procedure when I feel that I am sexually harassed.
- ⑤ I agree that when I am involved in civil and/or criminal lawsuits for my misconduct during the course period, KOICA has the right to acquire any information regarding the case.

Agree **Disagree**

III. GENERAL TERMS & CONDITIONS

a. Attendance & Punctuality

- ① Participants should be on-time and professional when submitting/presenting any reports and documents requested for the KOICA Fellowship Program.
- ② Participants should be punctual and devoted to following the schedule of the KOICA Fellowship Program. Participants are monitored and evaluated on their professional behavior while participating in the Program. KOICA may report the monitoring and evaluation results to Participants' government and/or employer when necessary. Absence without prior notice or acceptable reasons, and habitual tardiness are subject to evaluation, and may cause disadvantages.
- ③ Participants must leave Korea upon the completion of the Fellowship Program within three calendar days (seven calendar days for the Scholarship Program) unless they have obtained prior approval from KOICA and the government of their country of residence.

b. Misconduct

- ① Any form of harassment or insult, including but not limited to misconduct arising out of racial/ethnic, gender or class discrimination, whether it be physical or verbal, will not be tolerated and will be dealt with in accordance with the Korean law and KOICA policy.
- ② Any kind of disturbance to the efficient implementation of the Fellowship Program, including a breakaway from the Program, immoderate drinking, and other arbitrary and irresponsible behavior, will not be tolerated.
- ③ Participants are obliged to report immediately to KOICA of any damage incurred as a result of, or in connection with their act.

c. Security & Well-being

- ① Participants are responsible for their own personal belongings, safety, health and well-being.
- ② KOICA supports participants' medical expenses for accidents or diseases up to a limit covered by the insurance.
- ③ Participants, however, should pay for deductibles; and are solely responsible for the expenses exceeding the insurance coverage.

※ *Pregnancy or treatment for any kind of chronic disease is excluded from the insurance coverage.*

d. General Rules

- ① Participants should abide by the terms and conditions of both KOICA and the training institute with regards to the Fellowship Program.
- ② Participants should not bring any family members (dependants) to Korea or the country of training.
- ③ Participants should refrain from engaging in political activities and any form of employment for profit or gain during the course period. (improper offering of jobs for relatives, etc. included)
- ④ Participants are solely responsible for any claims, losses, damages, demands, actions, suits, and costs for legal proceedings that arise from their fault, misconduct, negligence, and/or failure to abide by the terms and conditions aforesaid during the course period.

IV. DECLARATION

I, _____, of _____ have read and fully agree to
(name of applicant) (name of country)

the terms and conditions set forth above and declare that all the information given above is true and complete.

*I will accept any penalties and consequences for failure to abide by the above terms and conditions,
including dismissal from the Program and report to my government and/or employer.*

Date: _____ **Applicant's Name:** _____ **Signature:** _____

PART. 3. MEDICAL REPORTS

I. MEDICAL REPORT 1 (to be completed by the applicant)

1. Present Status

a. Do you currently use any drugs for the treatment of a medical condition? (give name & dosage)

<input type="checkbox"/> No	<input type="checkbox"/> Yes >> Name of Medication (_____), Quantity (_____)
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b. Are you pregnant? (female only)

<input type="checkbox"/> No	<input type="checkbox"/> Yes >> (_____ months)
-----------------------------	--

c. Please indicate any needs arising from disabilities that may require additional support or facilities.

(_____)
<i>Note: Disability does not lead to dismissal or exclusion from the Program. However, upon the situation, you may be directly inquired by the KOICA Program Manager for more detailed account of your condition.</i>

2. Medical History

a. Have you had any significant or serious illnesses? (If hospitalized, give place & dates.)

Past:	<input type="checkbox"/> No	<input type="checkbox"/> Yes >> Name of illness (_____), Place & dates (_____)
Present:	<input type="checkbox"/> No	<input type="checkbox"/> Yes >> Present condition (_____)

b. Have you ever been a patient in a mental hospital or have been treated by a psychiatrist?

Past:	<input type="checkbox"/> No	<input type="checkbox"/> Yes >> Name of illness (_____), Place & dates (_____)
Present:	<input type="checkbox"/> No	<input type="checkbox"/> Yes >> Present condition (_____)

c. High blood pressure

Past:	<input type="checkbox"/> No	<input type="checkbox"/> Yes
Present:	<input type="checkbox"/> No	<input type="checkbox"/> Yes >> Present condition (_____) mm/Hg to (_____) mm/Hg

d. Diabetes (sugar in the urine)

Past:	<input type="checkbox"/> No	<input type="checkbox"/> Yes
Present:	<input type="checkbox"/> No	<input type="checkbox"/> Yes - Present condition (_____) - Are you taking any medicine or insulin? <input type="checkbox"/> No <input type="checkbox"/> Yes

e. What illness(es) have you had previously?

<input type="checkbox"/> Thyroid Problem	<input type="checkbox"/> Liver Disease	<input type="checkbox"/> Heart Disease	<input type="checkbox"/> Kidney Disease
<input type="checkbox"/> Tuberculosis	<input type="checkbox"/> Asthma	<input type="checkbox"/> Stomach and Intestinal Disorder	
<input type="checkbox"/> Infectious Disease >> Specify the name of illness (_____)			
<input type="checkbox"/> Others >> Specify (_____)			

f. Has the above illness(es) been cured?

<input type="checkbox"/> Yes	<input type="checkbox"/> No
- Specify the name of illness (_____) - Present condition (_____)	

I certify that I have answered all questions truthfully and completely to the best of my knowledge.

Date: _____ Applicant's Name: _____ Signature: _____

PART. 4. NOMINATION (to be completed by nominating government / organization)

I. Reasons for Nomination

e.g.) relevance of the Course to the applicant's duties; applicant's capabilities of developing the institutional capacity of the organization, etc.

II. Please attach ORGANIZATION CHART with an appropriate marking of the nominee's position

III. OFFICAL NOMINATION

The Government of _____ officially nominates _____
 (Name of Country) (Full Name of Nominee)

to participate in _____ as organized by the Korean Government(KOICA)
 (Title of Course)

and I, _____, on behalf of the Government of _____, certify that
 (Name of Authorized Official) (Name of Country)

- (a) All information including career and educational background quoted by the nominee in this form is true, complete and accurate to the best of my belief and knowledge.
- (b) The nominee has an adequate knowledge of and/or expertise in the training field and has a sufficient proficiency of the language required, both spoken and written, to undergo the Course.
- (c) On behalf of the organization I agree to the terms and conditions of KOICA.
- (d) My organization shall be responsible for dealing with claims by KOICA and third parties where the loss or damage to their property, or death or personal injury was caused by gross negligence or willful misconduct of the Nominee during the participation to the KOICA Fellowship Program.
- (e) Nominee's unsatisfactory performance or failure to conform to the code of conduct may lead to limited opportunities for the organization's nomination to the KOICA Fellowship Program.

Name(Authorized Official) : _____

Position/Title: _____ **Organization:** _____

Telephone: _____ **Email:** _____

Date: _____ **Signature:** _____

II. MEDICAL REPORT 2 (to be completed by an authorized physician)

1. Basic Health Information

Name					
Age		Blood Type		Height	cm
Sex		Blood Pressure	/ mmHG	Weight	kg

2. Health Examination Result

Name	Result	Remarks
EKG	<input type="checkbox"/> Normal <input type="checkbox"/> Abnormal	
Chest PA	<input type="checkbox"/> Normal <input type="checkbox"/> Abnormal	
Urinalysis	<input type="checkbox"/> Normal <input type="checkbox"/> Abnormal	
Diabetes	<input type="checkbox"/> Normal <input type="checkbox"/> Abnormal	
Hepatitis B	<input type="checkbox"/> Normal <input type="checkbox"/> Abnormal	
Syphilis	<input type="checkbox"/> Normal <input type="checkbox"/> Abnormal	
AIDS	<input type="checkbox"/> Normal <input type="checkbox"/> Abnormal	
Infectious disease	<input type="checkbox"/> Normal <input type="checkbox"/> Abnormal	
Endemic disease	<input type="checkbox"/> Normal <input type="checkbox"/> Abnormal	
Pregnancy test	<input type="checkbox"/> Normal <input type="checkbox"/> Abnormal	

3. How long have you known the person named above?
 Less than 6 months More than a year More than 5 years More than 10 years

4. Has this person received any medical treatment for the last 5 years?

<input type="checkbox"/> Yes	<input type="checkbox"/> No
- Specify ()	
- Present condition ()	

5. Does he/she have any conditions, whether in the past or present, that requires special care/attention or possibly disturb his/her participation to an intensive training course away from home?

<input type="checkbox"/> Yes	<input type="checkbox"/> No
- Specify ()	
- Present condition ()	

I certify that I have answered all questions truthfully and completely to the best of my knowledge.

Date : _____ Contact Information of Clinic : _____
 Name of Clinic : _____ Address of Clinic : _____
 Name of Physician : _____ Signature : _____

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2. FOR PARTICIPANTS

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○ Step 2. Action Plan

○ Step 3. Follow-up Activities

3. APPENDIX

15 From Airport to ICC

16 Contact





People, Peace, Prosperity + PLANET

KOICA 

Korea International
Cooperation Agency



Korea International Cooperation Agency

Korea International Cooperation Agency (KOICA) was established as a government agency dedicated to grant aid programs in April 1991. To achieve the 2030 Agenda for Sustainable Development Goals(SDGs), KOICA has set 4Ps -- People, Prosperity, Peace, and Planet -- as its core values, promoting mutual development cooperation for peace and prosperity centered on people that does not left behind any one.

CIAT

Capacity Improvement and
Advancement for Tomorrow



KOICA Fellowship Program, CIAT

Like its acronym that sounds like “seed” in Korean, CIAT hopes to spread seeds of hope across developing countries. CIAT is a cooperation program where policy-makers, public servants and experts from developing countries are invited to Korea for technical training and knowledge sharing.



CIAT has established partnerships with a multitude of public organizations, research institutes, universities and others in Korea to offer quality training programs. Such efforts have resulted in a high level of satisfaction among participants. After returning to their home countries, CIAT participants play a role in spreading Korea’s commitment and goodwill towards their society.



FOR APPLICANTS

PROGRAM OVERVIEW

TITLE: Korean Language and Culture Experts

DURATION: 2019-2021

GOAL: To expand the base of Korean language education and promote exchange with participating countries by cultivating talented people who are knowledgeable in Korean and Korean culture

	FIRST-YEAR COURSE (2019)	SECOND-YEAR COURSE (2020)	THIRD-YEAR COURSE (2021)
TARGET	College students majoring in Korean language in participating countries	College students majoring in Korean language in participating countries	College students majoring in Korean language in participating countries
OBJECTIVES	To promote understanding of Korean and Korean culture	To improve Korean speaking skills and Korean Culture Experience 1 To deepen understanding of Korean and Korean culture	To improve Korean speaking skills and Korean Culture Experience 2 Specialized understanding of Korean and Korean culture
ACTIVITIES	· Invitational Training	· Workshop for Interim Check · Invitational Training	· Invitational Training · Workshop for Final Check
OUTPUT	Action Plan	Revised Action Plan & Mid-outcome	Revised Action Plan & Final Outcome

(Selecting the best Action Plans and implementing on-site program)

Accomplishing the program's goals through capacity building and contributing to sustainable socio-economic development of developing countries

COURSE OVERVIEW

1. OBJECTIVES

- 1) To improve TOPIK grade and practical understanding of Korean culture through lectures on Korean and Korean culture
- 2) To expand the base of Korean language education and promote exchange with participating countries by cultivating talented people who are knowledgeable in Korean and Korean culture
- 3) To actively participate in bilateral friendship enhancement projects and to enhance effectiveness of linkage business through Korean cultural events hosted by the embassy or university in participating countries

2. COURSE DURATION

- (Invitational training) **July 9 (Thu) - Sep 26 (Sat), 2020** (including participants' arrival and departure dates) *Training Duration: July 10 (Fri) - Sep 25 (Fri).

3. LANGUAGE: Korean

4. LOCATION

- 1) Training: Silla University (Busan)
- 2) Accommodation: Silla University Global Town (Busan)

5. PARTICIPANTS: 22 persons

Cambodia, Colombia, Costa Rica, Cote d'Ivoire, Dominican Republic, Ecuador, Egypt, El Salvador, Indonesia, Jordan, Kyrgyzstan, Morocco, Paraguay, Sri Lanka(2), Tanzania, Thailand, Uganda(2), Uzbekistan, Vietnam

ELIGIBILITY REQUIREMENTS	
MANDATORY	<ol style="list-style-type: none"> 1. Be nominated by his/her government(college). 2. Be in good health both physically and mentally, enough to take the course. 3. Have a willingness to show a high level of participation and commitment throughout the course and contribute to the capacity building of his/her organization after the completion of the program. 4. Have not participated in the same or similar KOICA Fellowship Program for the past three years, unless otherwise specified. 5. Target organizations: the colleges opening Korean language education or the majors related to Korean studies. 6. Language capability : Those who have Korean ability equivalent to passing the TOPIK Level 3.
PREFERA	<ol style="list-style-type: none"> 7. Have excellent Korean language ability. 8. Working knowledge of computer and PowerPoint.
RECOM	<ol style="list-style-type: none"> 9. Those who are either junior or senior in college and interested in job or studying related to Korean after graduating college.

※ This course is targeted at participants meeting the above qualifications, and thus ineligible participants, if any, may have difficulty understanding the course.

6. CURRICULUM

MAIN LECTURES & DISCUSSIONS	STUDY VISIT
Module 1. Korean Language	
<ul style="list-style-type: none"> • Korean Listening, Reading, Writing, Speaking • Korean Vocabulary, Grammar, Pronunciation 	
Module 2. TOPIK II	
<ul style="list-style-type: none"> • Test of Proficiency in Korean (TOPIK II) (Listening, Reading, Writing) • Mock Test of Proficiency in Korean (TOPIK II) 	
Module 3. Korean Traditional Society and Culture	
<ul style="list-style-type: none"> • Traditional Korean Life Culture (Food, Clothing, and Shelter) • Culture and Etiquette of Korean Food • Korean Traditional Culture Contents • Geography, Climate, Population of Korea 	<ul style="list-style-type: none"> • Busan Money Museum • Busan National Gugak(Korean Traditional Music) Center • Visiting (Gyeongju, Ulsan, Kimhae, Sancheong, Andong) • Wearing traditional Korean Clothes(Hanbok) • Tea-enjoying Etiquette Experience • Korean Traditional Games • Enjoying Taekwondo • Making Hand Mirror, Folding Fan • Korean Paper Art • Making Korean-style Mask • Samulnori: Korean Traditional Percussion Quartet
Module 4. Korean Contemporary Society and Culture	
<ul style="list-style-type: none"> • Economic Growth and Cultural Industry of Korea • Korean Popular Culture (K-pop, K-Beauty) • Political System and Political Culture of Korea • Educational System and University Culture of Korea • Local Culture in Korea: Understanding Busan 	<ul style="list-style-type: none"> • Hyundai Motor / POSCO • Haeundae, Senteom City • Youngdo Island, Nampodong Songdo, Geojeodo, Oedo • Museum of Contemporary Art Busan • Home Visiting • Enjoying K-pop Dancing • Learning K-beauty • Korean writing contest
Module 5. Country Report and Action Learning / Plan	
<ul style="list-style-type: none"> • Introducing your country • Introducing Korean Language & Korean Culture • Investigating Korean Language Education & Current Status of Korean Culture in Your Country • Looking for ways To Build Relationships with Korea & Future-oriented Cooperation • Producing Korean Language, Korea Related Videos 	<ul style="list-style-type: none"> • (Report 5-1) Country Report 1 • (Practice 5-2) Action Plan - Theme Setting, Planning • (Practice 5-3) Specification of the Plan • (Practice 5-4) Action plan – Interim Presentation (SWOT Analysis) • (Practice 5-5) Action Plan – Simulation • (Practice 5-6) Action Plan – Creating an Action Plan • (Report 5-7) Country Report 2 • (Report 5-8) Action Paln - Final Announcement
EXTRACURRICULAR ACTIVITIES	
<ul style="list-style-type: none"> • Home-Visiting Program • Seoul City Tour (www.visitseoul.net) 	

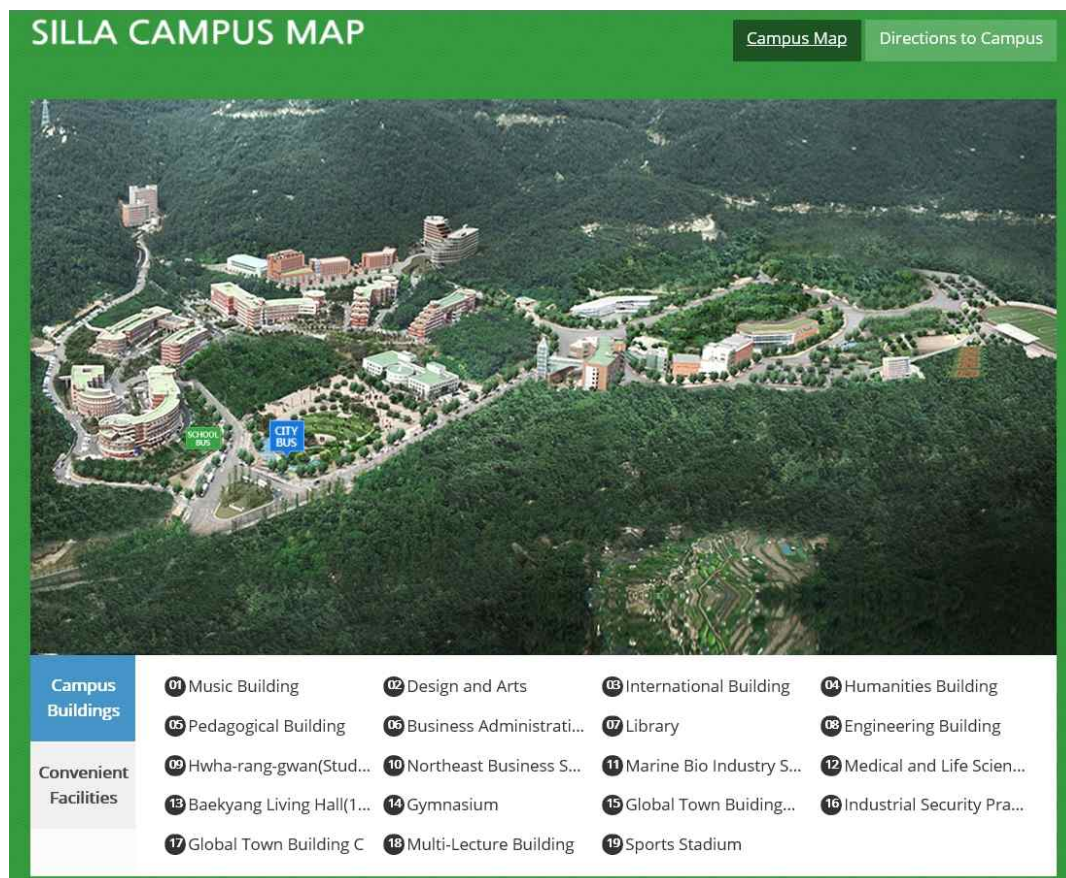
7. TRAINING INSTITUTE : Silla University (www.silla.ac.kr)

- Education for the Talented and Philanthropism -

Parkyoung Educational Foundation, which was established by Young-Taek Park, opened in 1954 Busan Women's Junior College, the predecessor of the present Silla University, with an educational ideology of love and service.

Hae-Gon Park continued Young-Taek Park's work and developed the junior college into a four-year college named Busan Women's College, whose purpose was to develop progressive women leaders who could lead the country and contribute to mankind. In 1997, the university's name was changed to Silla University and the university focused on cultivating creative competent-persons who are ready to use the knowledge-based information society of 21st century.

Silla University's mission is to develop competent persons who can persue truth, creatively improve their knowledge, create new culture, love mankind, serve society, and lead the future of our country. Furthermore, they will be able to contribute to the mutual prosperity of mankind by the passing on of the founder's ideology of philanthropy and education.



HOW TO APPLY

APPLICATION DEADLINE: May 4, 2020

Step 1. CHECK OUT COURSE INFORMATION

- Applicants must check Program Overview and Course Overview details to see if the course they apply for is relevant to their work and they meet the qualifications for selecting participants.

Step 2. FILL OUT AND SUBMIT AN APPLICATION.

- After filling out an application, applicants must submit it no later than the deadline.

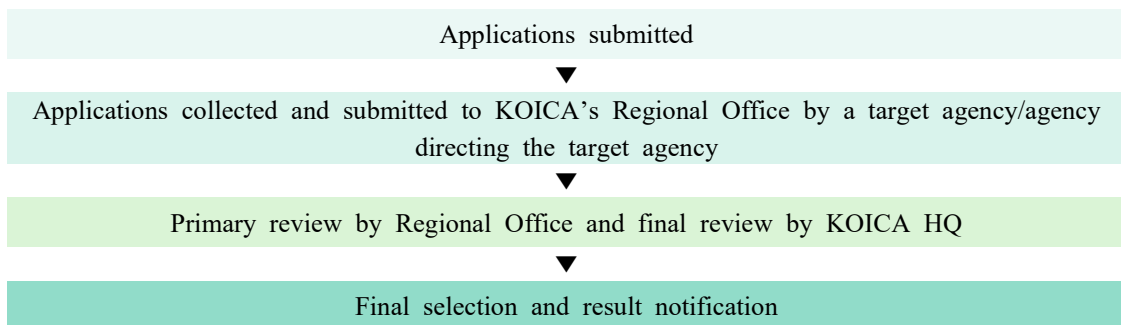
※ Instructions for filling out an application ※

- 1) Fill in all entries in the application form, including email address and medical records, **accurately and without omission** (The selection process of qualified applicants will start based on the information provided).
- 2) Applicants are required to fill out an application clearly and legibly.
(The course application result or follow-up activities after completion of the course will be notified to the email address an applicant gives in the application.)
- 3) Make sure to submit all the documents required for application.
(ex, Passport, Medical Reports etc.)

Step 3. SELECTION RESULT NOTIFICATION

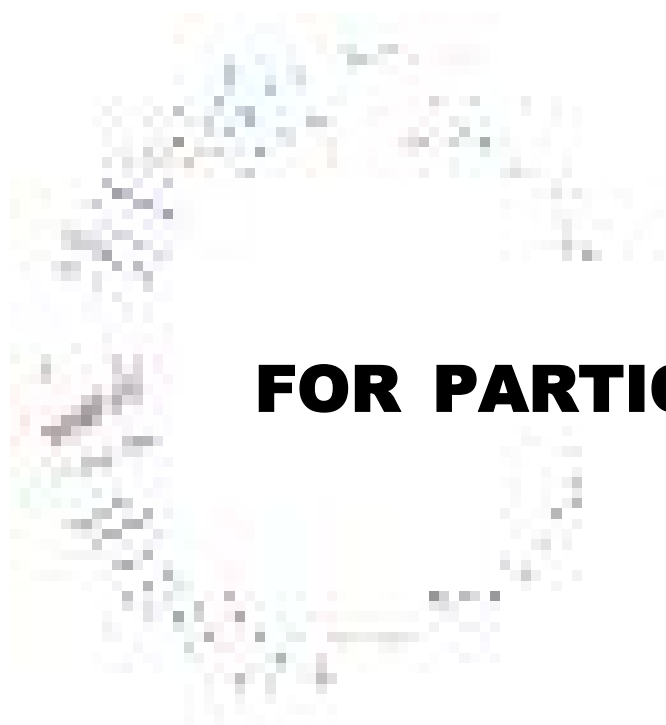
- KOICA headquarters will notify finally selected candidates to their email address.

※ Overview of the Selection Process ※



< Information for Successful Candidates >

- Successful candidates are required to submit Country Report no later than the deadline (For details, see the next page).



FOR PARTICIPANTS

PARTICIPANTS' MAJOR ACTIVITIES

All participants are requested to establish and present an Action Plan towards the end of the program. The Action Plan is one of the crucial program activities to which KOICA gives top priority. It is intended, firstly, to help program participants to come up with alternatives and solutions to the current issues and major challenges which participants' country/ university / college are facing and, secondly, to plan what action participants should take in order to solve those challenges.

For a successful Action Plan, **the first step is to prepare a Country Report.** In preparing a Country Report before joining the KOICA training course, participants will have an opportunity to analyze their own countries' current issues and challenges as well as circumstances surrounding them. Preparation and presentation of a Country Report is part of the Action Plan building process in which participants will be involved throughout the program.

The second step is to build an Action Plan. With the Country Report in mind, participants are encouraged to develop an Action Plan by incorporating the observations, experiences, and findings from the program, specifically from lectures, discussions, study visits, or local field trip. During the Program Orientation Session, the Action Plan guidelines, including a PPT template for presentation, will be provided to participants with instructions on how to formulate concepts and ideas for composing a practical and feasible Action Plan.

The third step is to implement the Action Plan. After going back to their home country, participants should implement the Action Plan according to its specifics and timeline. Participants are advised to do follow-up activities such as knowledge-sharing workshops or presentations with colleagues.

	STEP 1	STEP 2	STEP 3
WHO	Participants individually or as a group		
WHEN	Before program	During program	After program
WHAT	Country Report	Action Plan	Follow-up activities
HOW	Preparation and presentation	Establishment and presentation	Implementation
WHY	To analyze each country/college's current status and problems focusing on the program theme	To provide solutions to the identified problems and issues in the Country Report	To apply participants' Action Plan to work & share knowledge with colleagues

[STEP 1] COUNTRY REPORT

1. WHAT IS COUNTRY REPORT?

A Country Report is a pre-assignment prepared and submitted by participants before the course starts. Participants analyze their own countries' current issues and challenges as well as circumstances surrounding them, and share the findings with other participants and Korean experts in an effort to provide solutions to the identified problems and issues for their own countries.

2. HOW AND WHAT TO PREPARE

Participants are requested to prepare the Country Report individually or as a group and must submit it by the deadline specified below, so that it can be shared by lecturers in advance, before the program starts and also by fellow participants, moderators, discussants and Korean experts during the program in an effort to provide solutions to the identified problems and issues.

By when	June 24, 2020
In what format	Microsoft PowerPoint
To whom	Program Manager Ms. Hee-Young JEONG / 00jhy00@silla.ac.kr 00jhy00@gmail.com
Which contents?	Chapter 1. Introducing your country Chapter 2. Challenges and tasks for your country or college Chapter 3. Problems of Korean language education in your country (1) Institutions and facilities (2) Teaching-learning methods (3) Learning materials, etc Chapter 4. Challenges and tasks (1) Introducing Korea, Korean, and Korean culture to people of your country (2) Establishment of measures to revitalize the follow-up network of participants and follow-up support system * The topics of Chapters 3 and 4 will be covered in the Action Plan.

3. COUNTRY REPORT PRESENTATION

Each presentation should take no longer than 15 minutes or so, and use an adequate number of slides, or maximum 20 pages, with consideration of time constraints. Each Country Report presentation will be followed by a question and answer session which includes feedback from Korean experts. For more effective presentations, a projector, slide projector, overhead projector or multimedia TV will be available for use.

[STEP 2] ACTION PLAN

1. WHAT IS ACTION PLAN?

An Action Plan is a plan intended to help program participants provide alternatives and solutions to the issues and problems that are identified in the Country Report. A good Action Plan entails who will do what, when, and how in detail. Since the Action Plan's feasibility is very crucial, participants should thoroughly discuss with their supervisor(s) whether or not the main topic and direction are viable in advance.

Based on the observations and findings from the lectures, discussions, study visits, and a local field trip in Korea, participants will be asked to create an Action Plan in accordance with the Action Plan Guidelines to be provided. A session for developing and building the Action Plan will be held and the Action Plan guidelines will be provided to participants with instructions on how to formulate concepts and ideas for composing a practical and feasible Action Plan.

※ Note ※

- 1) Participants joining a second or third year course without attending the previous course or courses are required to review and understand the Action Plans by other participants in such course or courses in advance.
- 2) Participants may improve or develop the previous year's Action Plan, or build another Action Plan with a new topic.

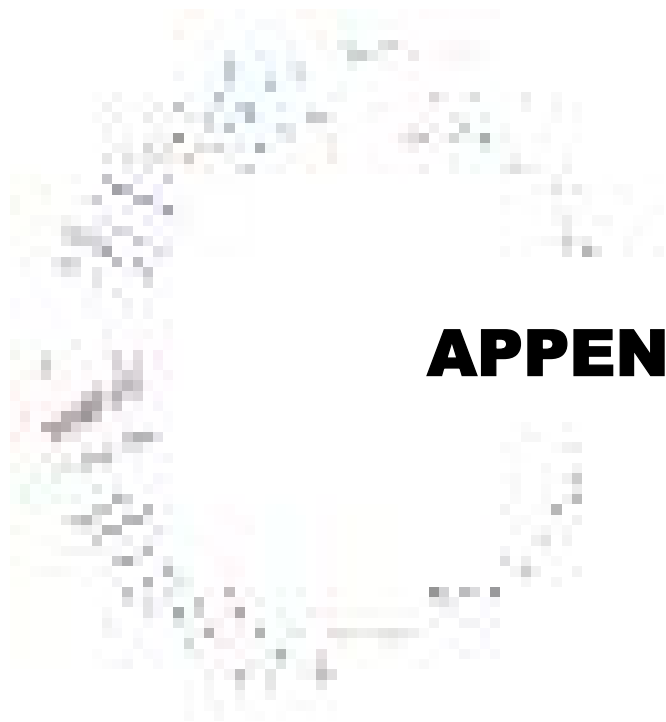
2. ACTION PLAN BUILDING PROCESS



- Applying knowledge acquired through lectures, study visits and discussions and working on measures to solve the issues or problems identified in the Country Report from various angles
- Building specific solutions as well as implementation plan together with a moderator during an Action Plan workshop

[STEP 3] FOLLOW-UP ACTIVITY

ACTION PLAN & PILOT PROJECT	Sharing the implementation status of the Action Plan with the training institute and KOICA (See Appendix: Contact) (An exemplary Action Plan is selected and financed by the training institute as a pilot project for implementation of the Action Plan)
KNOWLEDGE SHARING ACTIVITIES	Promoting knowledge spreading activities such as workshop and presentation to share knowledge acquired during the program and the Action Plan
ESSAY COMPETITION	Joining an essay competition held late in the year
KOICA CLUB ACTIVITIES	Taking part in an array of activities including joining KOICA Clubs in each country and community service after completion of the program
ONLINE NETWORKING	https://www.facebook.com/koica.icc Visiting KOICA Fellowship Community and continuing networking



APPENDIX

FROM AIRPORT TO ICC

✈ AT AIRPORT [Arrival Procedures]



※ KOICA will provide the Immigration Office at the Incheon International Airport with a list of participants' names, nationality, flight schedules, and other information regarding the Fellowship Program before arrival. Participants are advised to carry the **invitation letter** in which their status is written, and show the letter to the Immigration Officer in case the Officer asks for further identification.

KOICA COUNTER

To ensure that you receive appropriate help to safely get to the KOICA International Cooperation Center(ICC), two KOICA Counters are in service at each Terminal. At the KOICA Counter, KOICA staff will arrange your ride to the KOICA ICC.

AT INCHEON INTERNATIONAL AIRPORT TERMINAL 1 (IIAT 1)



Location

Next to Gate 1
(Counter No. 9-10)

Contact Info

Ms. Jin-Young YOON
Tel. : 82-32-743-5904

AT INCHEON INTERNATIONAL AIRPORT TERMINAL 2 (IIAT 2)



Location

In front of Gate 4
(Close to Arrival Gate B)

Contact Info

Ms. Seung-Young YAU
Tel. : 82-32-743-5905

CONTACT

KOICA Training Institute	+82-31-777-2600 (ICC Front Desk) http://www.koica.go.kr http://www.facebook.com/koica.icc	
	<i>Program Manager</i> Ms. Duri YOO +82-31-740-0540 duri_you@koica.go.kr	CIAT Fellowship Program pilot project follow-up activities
	<i>Program Coordinator</i> Ms. Ayoung KIM +82-31-777-2847 aykim@koworks.org	Arrival/departure-related issues
	<i>Program Manager</i> Ms. Hee-Young JEONG +82-51-999-6419 00jhy00@silla.ac.kr , 00jhy00@gmail.com http://www.silla.ac.kr	Course contents - Curriculum, lecture, lecturer, Country Report & Action Plan

Capacity Enhancement Program Department
Korea International Cooperation Agency
ICC Center, 825 Daewangpangyo-ro, Sujeong-gu, Seongnam-si,
Gyeonggi-do, Republic of Korea (13449)
Tel : 82-31-777-2600 / Fax : 82-31-777-2603
<http://koica.go.kr>



KOREA INTERNATIONAL COOPERATION AGENCY

KF202003026045

The Korea International Cooperation Agency (KOICA) Egypt Office presents its compliments to the Office of the Deputy Assistant to Foreign Minister for Wafideen, Training, Technical Cooperation, General Cultural and Religious Affairs, Ministry of Foreign Affairs of the Arab Republic of Egypt and has the honor to inform that KOICA invites (2) Two Egyptian Students for 2020 Fellowship Program on "Korean Language Intermediate " from **July 9 to September 26, 2020** in Korea.

KOICA Egypt Office encloses herewith the course information and application form. The candidate is asked to fill out the form and submit them with copy of passport to KOICA Egypt Office by **April 29, 2020**

In this regard, the Ministry is kindly requested to review the program outlines and guidelines and coordinate with the concerned University for the application process.

KOICA Egypt Office avails itself of this opportunity to renew to the Ministry the assurance of its highest consideration.

March 26, 2020

Enc.: As stated.



Cc: Dr. Naser Abdel Razek, Dean of the Faculty of Al Alsun, Aswan University (Mob: 01119191992, Fax: 0 9-7348-3107)

KOICA Egypt Office
World Trade Center 18th floor, 1191 Corniche El Nile, Boulaq, Cairo Egypt
Tel: 20-2-25763383/92/93 Fax: 20-2-25763236