Korea Forestry Promotion Institute

**Form 1 : Application for Kofpi Scholarship Program**

**1. Personal Information (Please TYPE or PRINT clearly. Use black ink.)**

|  |  |  |
| --- | --- | --- |
| Course to apply | □ Master Course □ Ph.D Course | Color Photo3×4 cm |
| Full Name | Native language |  |  |  |
| Family Name | First Name | Middle Name |
| English |  |  |  |
| Family Name | First Name | Middle Name |
| Nationality |  | Date of Birth : yyyy/mm/dd |  |
| Gender | □ Male□ Female | Marital Status | □ Single□ Married |
| E-mail |  |  |
| In Your Country | Address |  |
| Telephone | (Country Code- Area Code-Phone Number) |
| In Korea<if applicable> | Address |  |
| Telephone | ( Country Code- Area Code-Phone Number) |

**2. Education**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Period:yyyy/mm/dd | Institution | Years ofstudy | Major | Degree/Diploma | GPA |
| ∼ |  |  |  |  |  |
| ∼ |  |  |  |  |  |
| ∼ |  |  |  |  |  |

**3. Work Experience**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Period (yyyy/mm) | Institution or Company | Position | Responsibility | Phone |
| ∼ |  |  |  |  |
| ∼ |  |  |  |  |
| ∼ |  |  |  |  |

**4. Language Proficiency**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Language | Title of Test | Score | Date of Test | Level |
| Advance | Intermediate | Beginner |
| English |  |  |  |  |  |  |
| Others |  |  |  |  |  |  |

. . 2021.

Name (Signature)

Korea Forestry Promotion Institute

**Form 2 : Self-introduction Essay**

Write an essay for self-introduction **not exceeding 2 pages on an A4 size format**, one-sided only. It is recommended to contain the following things and must be typed or printed clearly using black ink.

1. Motive & Ambition

2. School Life & Experience

3. Work & Special Experience

※ Name(s) of university or school(s), date(s) of attendance(yy,dd), remarks

4. Strength and Weakness of Character

5. Others

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Name (Signature)

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**Form 3 : Study Plan**

Write a study plan not **exceeding 3 pages on an A4 size format,** one-sided only. The study plan must be written in English. Please refer to the format below and include your purpose and plans for future academic study or research. It must be typed or printed clearly using black ink.

|  |  |
| --- | --- |
| A field of Study | 1) |
| 2) |
| Purpose of Academic Study or Research and Detailed Plan |
|  |
| How would you use your knowledge acquired in Korea after returning to your home country?Please write a plan |
|  |
| How do you think your research can contribute to the Carbon Neutrality?(within 300 words) |
|  |

. . 2021.

Name (Signature)

Korea Forestry Promotion Institute

**Form 4 : Letter of Recommendation**

**본 추천서는 지원자의 희망 진학 대학원 지도교수가 작성해 주십시오.(한국 교수용)**

**(This form is for the professor from the applicant’s desired university in Korea )**

|  |  |
| --- | --- |
| 학 생 이 름 |  |
| 대학원 및 학과 |  |
| 주 요 전 공 |  |

1. 지원자가 작성한 수학계획에 대해 어떻게 생각하십니까?

2. 지원자가 한국에서 습득한 지식의 향후 활용도에 대하여는 어떻게 생각하십니까?

3. 지원자의 장점 및 단점은 뭐라고 생각하십니까?

4. 지원자에 대한 귀하의 전반적인 의견을 적어주십시오.

|  |
| --- |
| 추천자 인적 사항  |
| 1.성 명 | 2.학 과 명 |
| 3.직 위 | 4.전화 번호 |

2021. . .

추천자 서명

Korea Forestry Promotion Institute

**Form 4 : Letter of Recommendation**

**(This form is for the professor or chief of an organization of the applicant’s country)**

**To be completed by the applicant:**

|  |  |
| --- | --- |
| Full Name(Last Name/M/First name |  |
| Preferred Institution |  |
| Preferred Study Fieldor Research |  |

----------------------------------------------------------------------

**To the person giving a referral:**

Thank you for writing this letter on behalf of the person named above. Please indicate your candid and prompt assessment of the above named applicant.

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

2. What are the strengths and aptitude of the applicant?

3. What are the applicant's weaknesses? What weak points does she/he need to improve?

4. How do you think the applicant can apply his or her study plan at a graduate school in Korea? Do you think she/he will succeed in utilizing his/her knowledge acquired in Korea in the future?

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Name (Signature)

Korea Forestry Promotion Institute

**Form 5 : Pledge**

As a grantee of the Korea Forestry Promotion Institute scholarship, I pledge to abide by the following rules;

1. To refrain from violation of university regulations, and to fulfill my obligations as a student to the best of my ability.
2. To behave in a manner appropriate to the Korean culture and society, and not to participate in any form of political activity (such as organizing a political party, joining a political party, attending political meetings, publishing political articles and declarations, organizing or participating in demonstrations of a political nature, and so on).
3. To accept responsibility for paying any debts incurred in Korea

If I am proved to have violated any of the above articles, to have made a false statement in my application documents or to have failed to comply with academic standards or the rules of university or research institute, I shall accept the decision of Kofpi, even though it may include the suspension or revocation of the scholarship.

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Name (Signature)

Korea Forestry Promotion Institute

**Form 6 : Check list**

**(Personal Medical Assessment)**

|  |  |
| --- | --- |
| Name : |  |
|  | FIRST NAME | MIDDLE (INITIAL) | LAST NAME |

Please provide accurate information for the following questions.

|  |  |  |  |
| --- | --- | --- | --- |
| QUESTION | YES | NO | EXPLAIN |
| ① When and for what reason did you last consult a physician? (Please explain) |  |
| ② Have you had any serious ailment, injuries or diseases in the last five years? (If yes, please explain) |  |  |  |
| ③ Have you been hospitalized in the last two years? (If yes, please explain) |  |  |  |
| ④ Have you ever been treated by a doctor for any mental, emotional, or anxiety disorder?(If yes, please explain and attach are port from your doctor) |  |  |  |
| ⑤ Have you ever been addicted to any substance? (If yes, please explain) |  |  |  |
| ⑥ Do you have any allergies? (If yes, please list them) |  |  |  |
| ⑦ Are you taking any prescribed medication? (If yes,please explain) |  |  |  |
| ⑧ Are you on a special diet? (If yes, please explain in detail) |  |  |  |
| ⑨ Have you ever suffered from depression? (If yes, please explain) |  |  |  |
| ⑩ Have you ever diagnosed with COVID-19? |  |  |  |

|  |
| --- |
| 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 (mm/dd/yyyy) SIGNATURE OF THE APPLICANT |