



EPIK APPLICATION FORM FOR FALL 2010

⑥-3 CURRENT AND PREVIOUS RESIDENCE(S)

Please list the dates and names of your current address and where you have lived for 6 months or more for the past 10 years (you can omit addresses where you resided for a single school term). Please list starting from most recent residence. Add more rows if necessary.

| STATE / PROVINCE | COUNTRY | FROM (MM/YY) | TO (MM/YY) | YEAR(S) | MONTH(S) |
|--|---------|--------------|------------|---------|----------|
| <i>Residence listed in section ⑥-1</i> | | MM/YY | MM/YY | | |
| | | MM/YY | MM/YY | | |
| | | MM/YY | MM/YY | | |
| | | MM/YY | MM/YY | | |

⑦-1 CRIMINAL RECORD

Have you ever been charged (whether convicted or dismissed) with anything more serious than a minor traffic offense? **

| | |
|--------------------------|--------------------------|
| YES | NO |
| <input type="checkbox"/> | <input type="checkbox"/> |

**NOTE: ALCOHOL- OR SUBSTANCE-RELATED TRAFFIC OFFENSES ARE NOT CONSIDERED MINOR

⑦-2 MINIMUM EDUCATIONAL REQUIREMENTS

Have you studied in one of the seven (7) designated English-speaking countries beginning **from the first year of middle school** through high school **and** university for a minimum total of 10 years **AND** do you now or will you soon hold a Bachelors degree or its equivalent?

| | |
|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> |
|--------------------------|--------------------------|

⑦-3 WILLINGNESS TO WORK ANYWHERE IN KOREA

Are you willing to work at a public school anywhere in Korea?

| | |
|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> |
|--------------------------|--------------------------|

⑦-4 WILLINGNESS TO WORK AT ANY EDUCATIONAL INSTITUTION

Are you willing to work at any public educational institute (primary or secondary)?

| | |
|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> |
|--------------------------|--------------------------|

⑦-5 SUCCESSFUL CONTRACT COMPLETION*

Have you ever resigned from, or broken, any teaching contract, whether at home or abroad? If yes, please explain briefly:

| | |
|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> |
|--------------------------|--------------------------|

⑦-6 CURRENT CONTRACT STATUS

Do you currently hold a contract position in Korea? If yes, please give the exact finish date below.

| | |
|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> |
|--------------------------|--------------------------|

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| M | M | D | D | Y | Y | Y | Y |
|---|---|---|---|---|---|---|---|

** THE MANDATORY ORIENTATION WILL BEGIN IN MID-AUGUST 2010



EPIK APPLICATION FORM FOR FALL 2010

⑧-1 EDUCATIONAL BACKGROUND

Please fill out **all** of the requested fields below. For elementary, middle and high school, list all institutions you attended for each level. Add more rows if necessary. For post-secondary education, please list **all** of the institutions where you have obtained credits toward your degree(s). NOTE: EPIK does not recognize degrees obtained from post-secondary institutions outside one of the seven (7) designated English-speaking countries.

| LEVEL | NAME OF INSTITUTION | STATE/ PROVINCE & COUNTRY | ENROLLMENT | | GRADUATION DATE (MM/YY) | Number of years at school |
|------------------------------|---------------------|---------------------------|--------------|------------|---------------------------|---------------------------|
| | | | FROM (MM/YY) | TO (MM/YY) | | |
| ELEMENTARY SCHOOL | | | MM/YY | MM/YY | N/A | |
| MIDDLE SCHOOL | | | MM/YY | MM/YY | N/A | |
| HIGH SCHOOL | | | MM/YY | MM/YY | MM/YY | |
| POST SECONDARY EDUCATION (1) | | | MM/YY | MM/YY | MM/YY | |
| | DEGREE: | MAJOR: | | | GPA , UK Class , or % : / | |
| POST SECONDARY EDUCATION (2) | (IF APPLICABLE) | | MM/YY | MM/YY | MM/YY | |
| | DEGREE: | MAJOR: | | | GPA , UK Class , or % : / | |
| POST SECONDARY EDUCATION (3) | (IF APPLICABLE) | | MM/YY | MM/YY | MM/YY | |
| | DEGREE: | MAJOR: | | | GPA , UK Class , or % : / | |

⑧-2 TEFL/TESOL or CELTA CERTIFICATION

| TITLE OF CERTIFICATION | ACCREDITING INSTITUTION | ISSUE DATE (MM/YY) | HOURS COMPLETED |
|---------------------------|-------------------------|--------------------|-----------------|
| TEFL / TESOL (100+ Hours) | | MM/YY | |
| CELTA | | MM/YY | N/A |

**Successful applicants must provide documented proof of the number of completed hours for a TEFL or TESOL certificate. The original certificate must be shown before the contract start date.

⑧-3 TEACHING CERTIFICATION / LICENSE / CREDENTIALS

| | TITLE OF CERTIFICATION | ACCREDITING INSTITUTION | ISSUE DATE (MM/YY) | EXPIRY DATE (MM/YY) |
|--|------------------------|-------------------------|--------------------|---------------------|
| TEACHING CERTIFICATION/ LICENSE/ CREDENTIALS | | | MM/YY | MM/YY |

⑨ CONTACT INFORMATION FOR LETTERS OF RECOMMENDATION

| NAME OF REFEREE | NAME OF INSTITUTION | RELATIONSHIP TO YOU | PHONE | E-MAIL |
|-----------------|---------------------|---------------------|-------|--------|
| | | | | |
| | | | | |



EPIK APPLICATION FORM FOR FALL 2010

4/10

⑩ NON-TEACHING WORK EXPERIENCE List from the most recent employment. Add more rows if necessary.

| JOB TITLE | EMPLOYER | STATE/ PROVINCE & COUNTRY | FROM (MM/YY) | TO (MM/YY) | NUMBER OF MONTHS | FULL-TIME OR PART-TIME |
|-----------|----------|---------------------------------|-----------------|---------------|------------------------|------------------------------|
| | | | MM/YY | MM/YY | | |
| | | | MM/YY | MM/YY | | |
| | | | MM/YY | MM/YY | | |
| | | | MM/YY | MM/YY | | |

⑪-1 FULL-TIME TEACHING EXPERIENCE Please list only paid full-time teaching experience at an accredited educational institution. List from the most recent full-time paid teaching experience and add more rows if necessary.

IMPORTANT NOTE: For salary purposes, EPIK will only accept paid full-time experience occurring at the same institution for a minimum of "one full academic year".

| NAME OF INSTITUTION | POSITION TITLE | STATE/ PROVINCE & COUNTRY | AGE RANGE OF STUDENTS | FROM (MM/YY) | TO (MM/YY) | NUMBER OF MONTHS | | | | | |
|---|----------------|---------------------------------|-----------------------------|-----------------|---------------|------------------------|---|---|---|---|---|
| | | | | MM/YY | MM/YY | | | | | | |
| IF YOU NOW HOLD A CONTRACT POSITION, WHAT IS THE EXACT FINISH DATE OF THE CONTRACT? | | | | M | M | D | D | Y | Y | Y | Y |
| | | | | MM/YY | MM/YY | | | | | | |
| | | | | MM/YY | MM/YY | | | | | | |

⑪-2 CONTACT INFORMATION FOR FULL-TIME TEACHING EXPERIENCE IN KOREA

If you have taught in Korea, you should list the contact information of your previous/current institution(s). If you have done more than two contracts, please list the two most recent contracts.

| NAME OF INSTITUTION | NAME OF MAIN CO-TEACHER / DIRECTOR | OFFICE PHONE | EMAIL |
|---------------------|---------------------------------------|-----------------|-------|
| | | | |
| | | | |

⑪-3 PART-TIME STUDENT TEACHING or TUTORING EXPERIENCE List from the most recent experience and add more rows if necessary. You may also include education-related volunteer experience in this section.

| NAME OF INSTITUTION | POSITION TITLE | STATE/ PROVINCE & COUNTRY | AGE RANGE OF STUDENTS | FROM (MM/YY) | TO (MM/YY) | NUMBER OF MONTHS |
|---------------------|----------------|---------------------------------|-----------------------------|-----------------|---------------|------------------------|
| | | | | MM/YY | MM/YY | |
| | | | | MM/YY | MM/YY | |
| | | | | MM/YY | MM/YY | |

⑫ SALARY LEVEL The EPIK pay scale can be found on the EPIK website (www.epik.go.kr).

Please list the pay level that you currently qualify for and the level you expect to qualify for when you begin the EPIK contract (based on expected completion of TEFL/TESL/CELTA certification and/or teaching experience).

| | LEVEL 3 (beginning salary level) | LEVEL 2 | LEVEL 2+ | LEVEL 1 (top salary level) |
|------------------------|-------------------------------------|---------|----------|-------------------------------|
| CURRENT QUALIFICATION | | | | |
| EXPECTED QUALIFICATION | | | | |



EPIK APPLICATION FORM FOR FALL 2010

5/10

⑬-1 PROVINCIAL PLACEMENT PREFERENCES [\(please read\)](#)

Final recommendations to Provincial/Metropolitan Offices of Education depends on availability at the time that EPIK receives your completed required documentation. Therefore, because of the first-come, first-serve assignment of positions, [applicants must ultimately be flexible about working anywhere in Korea](#) in the case that their initial preferences are unavailable at the time of document completion.

PLEASE ALSO NOTE:

Successful applicants are unable to select specific cities/towns/districts within a province or specific districts within a metropolitan city.

⑬-2 PREFERENCE FOR PROVINCE TYPE

Please check the kind of province you would prefer to work in:

| REGULAR PROVINCE | METROPOLITAN CITY | EITHER |
|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

⑬-3 PREFERENCE FOR PROVINCE LOCATION

The 13 Provincial/Metropolitan Offices of Education that comprise the EPIK program are:

| Regular Provinces | |
|-------------------|-----------|
| Chungbuk | Gyeongbuk |
| Gangwon | Gyeongnam |
| Gyeonggi | Jeju |
| | Jeonbuk |

| Metropolitan Cities | |
|---------------------|---------|
| Busan | Gwangju |
| Daegu | Incheon |
| Daejeon | Ulsan |

List your location in order of preference:**

| FIRST | SECOND | THIRD | FOURTH | FIFTH |
|----------------------|----------------------|----------------------|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |

** Please note that applicants who successfully passed their interviews will only be recommended to a province/metropolitan city **upon successful submission of all the required documents** on an impartial first-come, first-serve basis. Please also note that the final acceptance decision is made by the Provincial/Metropolitan Office of Education and not the National EPIK Office.

⑬-4 PREFERENCE FOR TYPE OF EDUCATIONAL SETTING

In numerical order (1 being most preferred), list which type of school best matches your strengths:**

| PRIMARY SCHOOL | MIDDLE SCHOOL | HIGH SCHOOL |
|----------------------|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> | <input type="text"/> |

** Please note that only successful interview passers who couriered complete documents will be recommended to Provincial/Metropolitan Offices of Education. Placement decision is solely made by the education board personnel based on the strength of teaching credentials and qualification vis-à-vis those of other successful applicants competing for the same placement as well as the needs of school districts within a provincial or metropolitan board of education. As such, final placement decision of successful applicants will not be known nor guaranteed in advance. The proper forum and venue for this is during orientation or courtesy call with the district superintendent.

⑬-5 Do you understand that recommendations to a Provincial/Metropolitan Office of Education are made on a first-come, first-serve basis?

| YES | NO |
|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> |

⑬-6 Do you understand that you will only be recommended to a Provincial/Metropolitan Office of Education *after* successful submission of all required documents?

| | |
|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> |
|--------------------------|--------------------------|

⑬-7 Do you understand that specific school location(s) and type(s) is determined by the Provincial/Metropolitan Offices of Education and that this information will not be given until after your arrival in Korea?

| | |
|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> |
|--------------------------|--------------------------|

⑬-8 Do you understand that you may have to teach at more than one school?

| | |
|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> |
|--------------------------|--------------------------|

⑬-9 Are you willing to commute up to approximately 60 minutes to your school(s)?

| | |
|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> |
|--------------------------|--------------------------|



EPIK APPLICATION FORM FOR FALL 2010

6/10

⑭-1 JOINT APPLICATION (If applicable) please list other EPIK applicants you would like to live in the same province with.
IMPORTANT NOTE: EPIK cannot guarantee joint applicants placement in the same city in regular provinces or in the same district in metropolitan cities.

| NAME | M/F | RELATIONSHIP |
|------|-----|--------------|
| 1. | | |
| 2. | | |

MARRIED COUPLES HOUSING

IMPORTANT NOTE: Couples housing is offered only to **married couples** who are both participating as EPIK teachers. Marital status must be proved by means of identification with the same surname or a photocopy of the marriage certificate.

⑭-2 Are you married to the person listed in line 1 of section ⑬-1? YES NO

⑭-3 Would you like joint housing for you and your spouse listed in line 1 of section ⑬-1? YES NO

⑭-4 DEPENDANTS** Please list any dependants that will accompany you to Korea.

| NAME | RELATIONSHIP | M/F | AGE | NATIONALITY |
|------|--------------|-----|-----|-------------|
| | | | | |
| | | | | |

** Please note that EPIK does not provide family accommodations. Therefore, please be sure to discuss your intention to bring dependents with you to Korea with an EPIK staff member during the application interview. All applicants with dependents must complete a Statement of Intent, available in the "Application Form Instructions" document.

⑭-5 Are you planning on bringing any pets to Korea? YES NO

⑭-6 EMERGENCY CONTACT Please list the contact info of someone who can be reached easily in case of emergency.

| | | | | |
|---|-----------|---|-------------|---------|
| FIRST NAME | LAST NAME | RELATIONSHIP TO YOU | | |
| HOUSE NUMBER & STREET NAME | CITY | STATE/PROVINCE | POSTAL CODE | COUNTRY |
| HOME PHONE (INCL. COUNTRY CODE & AREA CODE) | | WORK PHONE (INCL. COUNTRY CODE & AREA CODE) | | |
| MOBILE PHONE (INCL. COUNTRY CODE & AREA CODE) | | EMAIL | | |



⑮ ADDITIONAL PERSONAL INFORMATION

| | YES | NO | IF YES, EXPLAIN BRIEFLY | |
|--|-----|----|-------------------------|---|
| ① Have you ever been charged (whether convicted or dismissed) with more than a minor traffic violation? ** | | | | |
| ② Have you ever applied to teach at a public school in Korea? Where did you apply? | | | | |
| ③ Are you currently applying for other ESL positions? In which provinces or countries? | | | | |
| ④ Have you ever visited Korea before? | | | | |
| ⑤ Do you have any Korean language skills? | | | | |
| ⑥ Are you a vegetarian or vegan? | | | | |
| ⑦ Are you aware that, although Korean dishes contain a lot of vegetables, a large number contain small amounts of meat or meat products? | | | | |
| ⑧ Have you ever lived or travelled abroad for 3 months or more? | | | | |
| ⑨ Do you have any tattoos or piercings? | | | | |
| ⑩ Are you familiar with the job description and working environment for GETs described on the EPIK website?* | | | | ** Driving under the influence of alcohol or other substances is NOT considered a minor offense. * www.epik.go.kr |
| ⑪ Are you aware that you will be expected to plan lessons in advance and sometimes lead English classes? | | | | |
| ⑫ Do you agree to notify EPIK within 48 hours if you drop out after you have received the Notice of Appointment? | | | | |
| ⑬ Are you prepared to bring approximately 1,000 USD worth of money (or the equivalent) to support your stay during the first month of your contract? | | | | |

✂ REQUIRED DOCUMENTS

If you successfully pass the EPIK interview, you will be required to submit all the necessary documents to complete your application. More information about the required documents can be found at the EPIK website (www.epik.go.kr) or obtained from your application agent. ****DOCUMENTS SUBMITTED TO EPIK WILL NOT BE RETURNED REGARDLESS OF THE FINAL OUTCOME OF THE SELECTION PROCESS. ****

The answers I have provided throughout this application are true and correct to the best of my knowledge and I will bear full legal and financial responsibility for any errors or falsehoods contained herein.

| | | |
|--|----------------|----------------|
| FIRST NAME | MIDDLE INITIAL | LAST NAME |
| | | MM / DD / YYYY |
| SIGNATURE (<i>DIGITAL APPLICANTS MUST TYPE HERE AND SUBMIT INK SIGNATURES LATER</i>) | | DATE |



EPIK APPLICATION FORM FOR FALL 2010

8/10

⑩ SELF MEDICAL ASSESSMENT

Applicants do not require an authorized medical exam before they arrive in Korea; **all successful applicants must take a comprehensive medical exam in Korea** in accordance with the requirements of the Korea Immigration Service and the EPIK program. If the results show that the applicant is unfit to be an EPIK teacher, all costs for entry, stay, and departure will be borne by the EPIK applicant.

| | | | | | | |
|--|--|------------------------|----|----------------------|----|------------------------|
| Gender: | | HEIGHT IN CENTIMETERS: | cm | WEIGHT IN KILOGRAMS: | kg | |
| ① When and for what reason did you last consult a physician? (Please explain in the adjacent space) | | | | | | |
| QUESTION | | | | YES | NO | IF YES, PLEASE EXPLAIN |
| ② Are <i>or</i> were you HIV (AIDS) Positive? | | | | | | |
| ③ Have you ever had an infectious disease that poses a risk to public health (such as, but not limited to, tuberculosis, and other STDs)? | | | | | | |
| ④ Have you ever had any of the following: | | | | | | |
| 1. allergies | | | | | | |
| 2. high blood pressure | | | | | | |
| 3. diabetes? | | | | | | |
| 4. any type of Hepatitis? | | | | | | |
| ⑤ 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). | | | | | | |
| ⑥ Have you ever been addicted to alcohol? | | | | | | |
| ⑦ Have you ever abused any narcotic, stimulant, hallucinogenic or other substance (whether legal or prohibited)? | | | | | | |
| ⑧ If necessary, are you prepared to undergo physical tests to verify the answers given in questions ⑥ and ⑦ above? | | | | | | |
| 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? | | | | | | |
| ⑪ Do you have any visual or hearing impairments (excluding those that are easily corrected with glasses or contacts)? | | | | | | |
| ⑫ Do you have any physical disabilities? | | | | | | |
| ⑬ Do you have any cognitive/mental disabilities? | | | | | | |
| ⑭ Are you taking any prescribed medication? | | | | | | |
| ⑮ Are you on a special diet? | | | | | | |
| ⑯ On average, how many standard servings of alcohol do you consume each week? | | | | | | |

The answers I have provided throughout this application are true and correct to the best of my knowledge and I will bear full legal and financial responsibility for any errors or falsehoods contained herein.

| | | |
|---|----------------|----------------|
| FIRST NAME | MIDDLE INITIAL | LAST NAME |
| | | MM / DD / YYYY |
| SIGNATURE (DIGITAL APPLICANTS MUST TYPE HERE AND SUBMIT INK SIGNATURES LATER) | | DATE |

**CONSENT FOR VERIFICATION
AND COLLECTION OF PERSONAL INFORMATION**

| | | | | | |
|--------------------------|----------------|---|----------------|-------------|---------|
| FIRST NAME | | MIDDLE NAME | LAST NAME | GENDER | |
| | | | | M | F |
| ADDRESS (NO., ST., APT.) | | CITY | STATE/PROVINCE | POSTAL CODE | COUNTRY |
| | | | | | |
| BIRTH DATE (MM-DD-YY) | PLACE OF BIRTH | TELEPHONE NUMBER (COUNTRY & AREA CODE) | | EMAIL | |
| | | | | | |

I hereby authorize the English Program in Korea (EPIK) under the Korean Ministry of Education, Science & Technology to verify on my behalf the information disclosed in this application form and the documents required by EPIK as well as collect other information deemed necessary by EPIK to determine the applicant's suitability from any institution, organization or individual issuing said information and/or documentation.

| | | |
|---|----------------|----------------|
| FIRST NAME | MIDDLE INITIAL | LAST NAME |
| | | MM / DD / YYYY |
| SIGNATURE (DIGITAL APPLICANTS MUST TYPE HERE AND SUBMIT INK SIGNATURES LATER) | | DATE |

**English Program in Korea (EPIK)**

National Institute for International Education (NIIED)
Ministry of Education, Science & Technology (MEST)
In Cooperation with ESL Job Network

Fax +82-2-765-9947 **Email** jobs@iteachntravel.com
Phone +82-2-3668-1400/1401 **Website** www.epik.go.kr
Address 43 Ihwajang-gil, Jongno-gu, Seoul, 110-810, Republic of Korea



EPIK APPLICATION FORM FOR FALL 2010

10/10

⑰ PERSONAL ESSAY

FIRST NAME

MIDDLE INITIAL

LAST NAME

✂ Please write an essay below (minimum 500 words; maximum 1 page; use size 11 font)

We are interested in your ability to succeed as an ESL teacher in a public school in Korea. In the space below, please share with us your reasons for wanting to teach ESL in Korea, your educational philosophy and your thoughts on encountering and managing cultural differences.