

① **NAME IN PASSPORT** Include any suffix (Jr., Sr., etc)[illegible]

Insert a
passport quality
photo in
professional
attire here

②-1 DATE OF BIRTH

YEAR	MONTH	DAY	

②-2 AGE

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③-1 GENDER

1

MALE

③-2 MARRIAGE

Page 10

MARRIED UNMARRIED

③-3 PLACE OF BIRTH

CITY (STATE/PROVINCE) _____ COUNTRY _____

④-1 PRIMARY CITIZENSHIP

CITIZENSHIP YOU WOULD USE TO TEACH IN KOREA

④-2 SECONDARY CITIZENSHIP

LIST ANY OTHER CITIZENSHIP(S) YOU HOLD

④-3 KOREAN HERITAGE (IF APPLICABLE)

YES	NO

- Are you ethnically Korean? (if no, proceed to ⑤)

- Does the Korean government consider you to be a holder of Korean citizenship? You **MUST** consult the Korean Embassy/Consulate about your nationality status **BEFORE** applying.

YES	NO

④-4 VISA APPLICATION LOCATION

Indicate the Embassy/Consulate where you will apply for your visa:

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⑤ SKYPE INTERVIEW CONTACT INFORMATION

Available interview time frame**		Skype ID	
Primary Phone		City & Country	
Secondary Phone		City & Country	
Primary Email		Secondary Email	

**** Skype interviews are scheduled according to Korean Standard Time (KST). Interview times are available Monday to Friday from 09:00-12:00 and 13:00-18:00. Please list all available interview times (e.g., M-F, 13:30-16:30 KST). Failure to list interview times in KST or time conversion errors will result in delays in interview scheduling.**

⑥-1 CURRENT AND PREVIOUS RESIDENCE(S)

List each residence where you have resided in the past 5 years, starting with your **current** residence. Add more rows if necessary.

	CITY and STATE / PROVINCE	COUNTRY	FROM (MM/YY)	TO (MM/YY)	YEAR(S)	MONTH(S)
CURRENT						
PREVIOUS						

⑥-2 MAILING ADDRESS

Please list the mailing address you would like your contract sent to. Please notify your application agent or GOE *immediately* of any address changes.

Changes:				
HOUSE NUMBER & STREET NAME	CITY	STATE/PROVINCE	POSTAL CODE	COUNTRY
TELEPHONE (INCL. COUNTRY CODE & AREA CODE)		EMAIL		



⑦ EMERGENCY CONTACT

List the contact information for a family member who can be reached in case of an 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		

⑧-1 EDUCATIONAL BACKGROUND

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: GOE 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	MM/YY	
MIDDLE SCHOOL			MM/YY	MM/YY	MM/YY	
HIGH SCHOOL			MM/YY	MM/YY	MM/YY	
POST SECONDARY EDUCATION (1)	DEGREE:	MAJOR:			Overall Grade:	
POST SECONDARY EDUCATION (2)	(IF APPLICABLE)		MM/YY	MM/YY	MM/YY	
	DEGREE:	MAJOR:			Overall Grade:	
POST SECONDARY EDUCATION (3)	(IF APPLICABLE)		MM/YY	MM/YY	MM/YY	
	DEGREE:	MAJOR:			Overall Grade:	

⑧-2 ENGLISH TEACHING CERTIFICATION / VALID TEACHING CERTIFICATION

TITLE OF CERTIFICATION	ACCREDITING INSTITUTION	ISSUE DATE (MM/YY)	TOTAL COURSE HOURS	
TEFL / TESOL / CELT / CELTA		MM/YY	In-class	Online
Teaching Certificate / License / Credentials		MM/YY		

****Successful applicants must provide documented proof of the number of completed hours for a TEFL or TESOL certificate.**

⑧-3 FULL-TIME / PART-TIME TEACHING EXPERIENCE

Please list your **teaching experience** at an accredited educational institution. Add more rows if necessary.

NAME OF INSTITUTION	POSITION TITLE	FULL / PART TIME	SUBJECT	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						



⑧-4 CONTACT INFORMATION FOR FULL-TIME TEACHING EXPERIENCE IN KOREA

If you have taught in Korea, please list the contact information from your institution(s). If you have completed more than two contracts, please list the two most recent contracts.

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

⑧-5 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		

⑨ CONTACT INFORMATION FOR LETTERS OF RECOMMENDATION

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

⑩ SALARY LEVEL

The GOE pay scale can be found on the EPIK website (www.epik.go.kr) – “Job Description >> Salary & Benefits”. Please make an “X” for the pay level that you *currently* qualify for **and** the level you *expect* to qualify for when you begin the GOE contract.

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

⑪ JOINT APPLICANT

(If applicable) **IMPORTANT NOTE:** Joint applicants are restricted to **only married couples who are both applying to GOE**. Marital status must be proved by means of identification with the same surname or a photocopy of the marriage certificate.

Name	Relationship	M/F	Age	Couple Housing
1.				Y / N

⑫ PLACEMENT

Please select 2 city **AND** 2 countryside locations **OR** Leave blank for no preference

If you select 2 city locations and do not select any countryside locations, your placement will be considered as no preference. You **MUST select 2 city AND 2 countryside locations.*

**Please understand your preferences are taken into consideration, but is not a guarantee.*

City	County
① Changwon	① Haman
② Jinju	② Geochang
③ Yangsan	③ Changnyeong
④ Geoje	④ Goseong
⑤ Tongyeong	⑤ Namhae
⑥ Sacheon	⑥ Hapcheon
⑦ Miryang	⑦ Hadong
	⑧ Hamyang
	⑨ Sancheong
	⑩ Uiryeong



⑬ SELF-MEDICAL ASSESSMENT

QUESTION		YES	NO	IF YES, PLEASE EXPLAIN
Are you prepared to undergo physical tests to verify the answers given in the Self Medical Assessment?				
Have you ever had any of the following:				
1. Allergies				
2. High Blood Pressure				
3. Diabetes				
4. Any type of Hepatitis				
Do you currently have or ever had any infectious disease that threatened public health before (such as, but not limited to: Cholera, Tuberculosis, etc)?				
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 a medical report).				
Have you ever abused or been addicted to alcohol, any narcotic, stimulant, hallucinogenic or other substance (whether legal or prohibited)?				
Are you taking any prescribed medication?				
Do you have any cognitive or mental disabilities?				
Do you have any visual or hearing impairment (excluding those that are easily corrected with glasses or contacts) <u>or</u> any physical disability?				
Have you had any serious injury or sickness in the last five years?				
Medically speaking, do you have any dietary restrictions?				
On average, how many standard servings of alcohol do you drink each week?				
On average, how many cigarettes do you smoke per day?				
HEIGHT IN CENTIMETERS (round to the nearest whole number):	cm	WEIGHT IN KILOGRAMS (round to the nearest whole number):		kg

1 in = 2.54 cm

1 lb = 0.45 kg

⑭ ADDITIONAL PERSONAL INFORMATION

	YES	NO	IF YES, PLEASE EXPLAIN
① Have you studied in one of the seven (7) designated English-speaking countries (or studied at an English speaking accredited international school) beginning from grade 7 in middle school through high school and university for a minimum total of 10 years?			
② Do you have a Bachelor's degree or its equivalent? If no, please indicate the exact date you will receive your diploma.			
③ Have you ever resigned from, or broken, any teaching contract, whether at home or abroad?			
④ Besides earlobe piercings, do you have any other piercings or tattoos? (Be specific. For tattoos, please indicate size and location)			
⑤ Have you ever been charged (whether convicted or dismissed) with any offense/crime? (Alcohol, substance-related & traffic offenses included)			
⑥ Are you a vegetarian or vegan?			
⑦ Do you have your own housing in Korea not provided by your current employer and want the housing stipend? If yes, please provide your Korean address. Note: Selection cannot be changed after submission of this application.			
⑧ Are you applying with any other person (excluding joint applicants)? If yes, please indicate their full legal name and your relationship to them. NOTE: We cannot guarantee placement in the same area.			



GYEONGSANGNAM-DO OFFICE OF EDUCATION (GOE)

APPLICATION FORM 2017

5/7

15 ACKNOWLEDGEMENT OF GOE POLICIES

	CHECK
① I understand that documents submitted to GOE will NOT be returned regardless of the final outcome of the selection process.	
② I understand I will be expected to plan lessons in advance and lead English classes.	
③ I will notify the GOE immediately if I decide to withdraw from the program. If I withdraw after receiving final approval, I understand that I will be unable to reapply for 1 year and must mail back any documents from the GOE.	
④ I am prepared to bring the equivalent of 1,000 USD to support my stay during the first month of my contract.	
⑤ I understand that specific school location(s), type(s), and grade level(s) and the number of schools I may teach at are determined by GOE and will not be released until after my arrival in Korea.	
⑥ I understand commuting times may vary and sometimes be upwards of 60 minutes.	
⑦ I understand that as a GOE teacher, I am not allowed to have any pets while residing in Korea.	
⑧ I will immediately inform the GOE of any change in my health (surgery, pregnancy, injury, additional prescribed medication, etc.) or of any new tattoos or facial piercings that are obtained after submission of this application. I understand that this information must be shared with GOE within 24 hours and that if I have received a placement, it may be grounds for reevaluation by the GOE.	
⑨ I understand that all successful applicants must take a medical exam in Korea in accordance with the requirements of the GOE program. If the results show that the applicant is unfit to be a GOE teacher, all costs for entry, stay, and departure will be borne by the GOE applicant.	
⑩ I will keep all tattoos covered when in any educational or professional setting. I will take measures to ensure that tattoos will not be seen by any student, educator, instructor, supervisor, or other individuals associated or affiliated with my educational institution or the GOE. I will accept any consequences for the failure to do so. I will also remove any piercings if asked to by my superiors.	
⑪ I will not smoke on school grounds or at any school functions. I understand that I may or may not be able to smoke inside the school-provided housing and will abide by the rules of the housing's landlord. I will refrain from smoking in public where there is a reasonable chance that I may be seen by students or co-workers.	
⑫ I give permission to the GOE to use the email contacts provided this application for the purposes of communication, providing information, conducting surveys and etc. as needed. I give authorization for any photos and videos of me taken during any GOE affiliated event to be used in any promotional, educational, or other materials.	
⑬ I hereby authorize the GOE to verify on my behalf the information disclosed in this application form and the documents required by GOE as well as collect other information deemed necessary by the GOE to determine the applicant's suitability from any institution, organization or individual issuing said information and/or documentation.	
⑭ I understand that all information provided to the GOE will be stored on secured servers where access will be limited to the GOE staff and affiliates. I understand that all reasonable efforts will be made to protect confidential and sensitive information.	
⑮ The answers I have provided throughout this application are true and correct and I will bear full legal and financial responsibility for any errors or falsehoods contained herein. I am aware that any violation of GOE policies, even prior to arriving in Korea, can result in termination of the GOE Notice of Appointment and Contract.	
⑯ By signing below, and submitting my application, I understand and agree that the failure to uphold any of the above statements may be grounds for termination of my contract offer.	

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

Gyeongangnam-do Office of Education Contact:

Jin Kim, Foreign Coordinator

Address: Gyeongangnam-do Office of Education (School Innovation Division)

241 Joongang-daero, Uichang-gu, Changwon-si, Gyeongangnam-do, South Korea 641-719 (51430)

Phone: +82-55-268-1517

Fax: +82-55-268-1529

Email: Kimyjin@korea.kr





⑩ PERSONAL ESSAY

※ Please write an essay below (minimum 500 words; maximum 800 words; use size 11 font; single spaced)

We are interested in your ability to succeed as an EFL teacher in a public school in Korea. In the space below, please share with us your reasons for wanting to teach EFL in Korea, your educational philosophy and your thoughts on encountering cultural differences. If you have previously taught in Korea or are currently teaching in Korea, please state why you would like to return or continue teaching in Korea.

FIRST NAME

MIDDLE INITIAL

LAST NAME



LESSON PLAN

Please use the sample template below to help you create a lesson plan. For your reference we have created a guide for lesson planning that can be found in the instructions.

Any application with a lesson plan that does not meet the minimum requirements will not be considered for an interview.

※ Minimum 2 full pages, single-spaced
Maximum 5 pages including all attachments

Lesson Plan (*sample template*)

Date:

▶ Subject: **English**

▶ Unit (Title):

▶ Grade (No. of Students):

▶ Objectives: *By the end of the lesson, students should be able to...*

- 1.
- 2.

▶ Key Expressions: *Students will focus on using the following language.*

- 1.
- 2.

▶ Teaching Aids/Materials: *The instructor will require the following materials.*

- 1.
- 2.

▶ Steps and Procedures (*The following is a sample procedure. You can develop your own naming for each stage. As for the timing of the lesson, it will depend on the arrangements in your school. In Korean public schools, the instruction hours for each level are as follows: 40 min. in elementary school, 45 min. in middle school and 50 min. in high school. Depending on how long your class is, the 'Development' will stretch and contract as necessary. In other words, your 'Introduction' should be five to ten minutes, your 'Conclusion' five minutes, and your 'Development' should be whatever time remains in between for the students to practice the target language.*)

1) Example 1

- Introduction (5 min.): greetings & warm up, review, class arrangement, presentation of objectives
- Development (30-40 min.): presentation of today's activities, practice, production
- Conclusion (5 min.): summary (review), evaluation of objectives (formative test), wrap up & assignment, presentation of the next lesson

2) Example 2 : Introduction, Presentation, Practice, Production, Conclusion

3) Example 3: Introduction, Body, Conclusion

4) Example 4 : Engage, Study, Activate, Summarize

5) Example 5 : Introduction and Warm up, Vocabulary and Handout, Navigation Quiz,
Group Activity, Presentation, and Conclusion