Application Form

Hallym University - International Exchange Application – This application must be posted to: Care of MOONJU ROH: Global Engagement Center: Administration Annex(Building no.5) 2F-5203, Hallym University, 1 Hallymdaehak-gil, Chuncheon, Gangwon-do, 24252 Republic of Korea (Phone +82. 33. 248. 1348)

- Application must be written in English.
- Please **TYPE** all the information in the provided fields before printing and signing this document.
- This application must be reviewed and signed by the International Coordinator at your home institution or your application will not be considered.

X Please TYPE (by COMPUTER) and PRINT clearly

	Given na	ıme	Family name (Surname)			Ge	nder			
Full Name							□ Ma	le	□ Female	
* Name should h	e snelled in English	the same as in	the nassnort	(Vour na	me at	the very	hottom of	f th	e nassnort	Dassport style photo here
* Name should be spelled in English the same as in the passport (Your name at the very bottom of the passport photo page, please refer to the pre-arrival guide for more information)*								Passport style photo here		
Date of Birth	Example 10 th May 1990 Citizenship				Primary Language					(this photo will be used for your student ID)
Name of Home University			Academic Major at home institution		iome					You must attach a photo here
Country of Home University			l		he choice will be made for you, I on your course selections			(35mmx45mm)		
Academic Status	□Freshman □Sophomore □Junior □Senior Number of semesters you plan to study at Hallym University □ one □ two									
Mailing Address	Not for an e-mail, but postal address									
Mobile	Please put your national code. Ready to dial if we to call you from Korea			we need	E-mail Please do not capitalize the first letter of your email unless that is how you registered it			the state of the s		
※ In case of emergency, person we should contact										
Emergency Name		Emergency Address	/						Telephone (Mobile)	

Coordinator information for outgoing student at your home university (please type this information, do not hand write)

Name	Job title	E-mail	Telephone
Eunice Ang	Dy Manager	Eunice_ang@nyp.edu.sg	+65 6550 1703
Mailing Address in ENGLISH	Not for an e-mail, but postal ad Street: 180 Ang Mo Kio Ave 8 District: Singapore City: Singapore Post code/Zip code: 569830	ddress:	

Your application will be rejected if you fail to submit ALL DOCUMENTS

☑ I verify that	t I have read this application and all the information contained here is true to the best of my knowledge.
Applicant's signature:	Date:

Approval of the Exchange Advisor at home	institution	
Name:	Title:	
Cinc at one	Datas	

Once you have posted your complete application form to the address given above, please email <u>lao33@hallym.ac.kr</u> to confirm this + provide the tracking number for the posted documents + student name (it is highly recommended that you send them by registered post, such as DHL)

Self-Introduction

* Please type (with computer) within 1 page using a black font (In Korean or in English). The questions below are for guidance, please delete them before sending your application.
Please include some information about your hobbies/interests/personality to help us match you to a similar Korean 'buddy' (wherever possible).
Please explain why you chose Hallym University, why you chose your course selection(s) and what you hope to achieve from your exchange period in Korea.
Explain any research you've done about living in Korea/Chuncheon and any difficulties you think you may face living in a new environment. How do you plan to overcome these difficulties?

Dormitory Application - For International Exchange Students

Please note.	your accommodat	ion selection is n	ot auaranteed	l. until v	vou have been	formall	v notii	fied
	, , , , , , , , , , , , , , , , , , , ,		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, ,	,	,	,,	

No.		Please check						
1		630,000KRW per semester (without meal plan)						
_	Dormitory No.1	Three students share one room						
2		724,000KRW per semester (without meal plan)						
	Dormitory No.3	Three students share one room						
3		• 1,202,000 KRW per semester (without meal plan)						
3	Dormitory No.8	Two students share one room/						

<u>HEALTH DECLARATION FORM</u> CONFIDENTIAL MEDICAL QUESTIONNAIRE FOR STUDENTS

Have you had any of the following? (Please highlight as appropriate)

Asthma or Bronchitis	YES	NO	Allergies to any known medication	YES	NO
Heart condition	YES	NO	Any other allergies, i.e. material, food	YES	NO
Fits, fainting or blackout	YES	NO	Other illness or disability	YES	NO
Severe headaches	YES	NO	Travel sickness	YES	NO
Diabetes	YES	NO	Mental health issues	YES	NO
Epilepsy	YES	NO	Regular medication	YES	NO

If the answer to any of these questions is 'YES', please give the details below:

■ Have you received	l vaccination agains	it Tetanus in the I	ast 10 yea	ars? <u>YES/NO</u>
(if 'no' it is highly re	ecommended that y	ou do so before	you start y	our exchange)

■ Are you currently receiving medical or surgical treatment of any kind from either your family doctor or hospital? YES/NO

If yes, please give details below

I hereby give permission for Hallym University staff to discuss any disclosures on this form, with the International Coordinator at my home University. $\underline{\text{YES/NO}}$

All information given on this form is true and accurate to the best of my knowledge. **YES/NO**

All disclosed information will remain confidential and will only be discussed between you the student, Hallym International Office coordinators and your home international Coordinator, (if Hallym International Office feel the need to discuss your disclosures with them.)

Student name:	
Signed (student):	Date:

Agreement on the Handling of Personal Information

Hallym University, Republic of Korea, values the protection and privacy of the applicant's personal information in accordance with the related law, the Personal Information Protection Act. For the purposes of admission, administration and service provision, Hallym University is required to obtain the applicant's consent to collect and use personal information as follows. If you fully understand this agreement, please grant your consent (check box and provide signature) to the university to collect and use your personal information.

Article 1 – Agreement on the Collection and Use of Personal Information

Personal Information to be Collected and Used	Purposes of Collection and Use	Period to Retain and Use Personal Information
Name, date of birth, gender, home address, e- mail, telephone number, and academic background that the applicant has declared on the application form	Processing and management of admission for study, verification and validation of study experiences and qualifications Provision of student services such as campus housing, student activities and medical service	From the time it is collected until the date its prescribed purpose is fulfilled

Note that you may not consent to the collection and use of your personal information. However, if you deny consent, your access to various university services, including welfare, education and administrative services, may be limited or restricted.

Consent to collection and use of personal information

I agree

I do not agree

Article 2 – Agreement on the Sharing of Personal information with Third Parties

Personal Information to be Shared	Parties to be Provided with Personal Information	Purposes of Collection and Use	Period to Retain and Use Personal Information
Name, date of birth, gender, address, e-mail, passport information and academic background	 Korean government agencies or public organizations that require personal information for study purposes; Ministry of Foreign Affairs and Trade, Ministry of Education, Immigration Service and Ministry of Justice, etc. Subcontractor performing work consigned by Hallym University: insurance company, travel agency, etc. 	Cooperation with Korean government Handling of visa/immigration services: letter of admission, identification card, alien registration number, resident permit, etc.	From the time it is collected until the date its prescribed purpose is fulfilled

Note that you may not consent to the collection and use of your personal information. However, if you deny consent, your access to various university services, including welfare, education and administrative services, may be limited or restricted.

Consent to collection and use of personal information

I agree

I do not agree

Article 3 – Agreement on the Collection and Use of Personally Identifiable Information

Personally Identifiable Information to be Collected and Used	Purposes of Collection and Use	Period to Retain and Use Personal Information
Passport number, alien registration number, student number, student photos	 Processing and management of admission for study and stay in Korea Verification and validation of study experiences and qualifications Student photos *potentially* used for PR, such as website publication, video and brochure use 	From the time it is collected until the date its prescribed purpose is fulfilled

Note that you may not consent to the collection and use of your personal information. However, if you deny consent, your access to various university services, including welfare, education and administrative services, may be limited or restricted.

I fully understand the contents written above and agree that Hallym University shall collect and use my personal information in accordance with the related law, the Personal Information Protection Act.

(Signature) Date: (YYYY.MM.DD) Name: