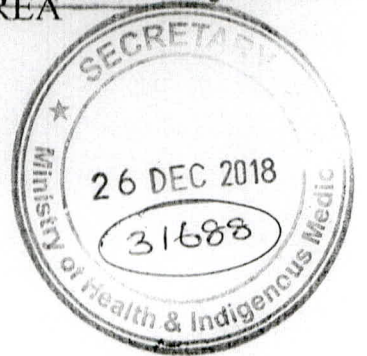


13/
For nomination by Addl. Sec MS & PHS & DGHS
31/12/18

Kapiti S / Please advise as instructed by DDG(P) Secretary Health
31/12/18
02/01/19
27/12

EMBASSY OF THE REPUBLIC OF KOREA

Secretary
Ministry of Health, Nutrition & Indigenous Medicine



KSR/284/2018

The Embassy of the Republic of Korea presents its compliments to the External Resources Department (ERD) of the Democratic Socialist Republic of Sri Lanka and has the honour to transmit herewith documents related to the "Dr. Lee Jong-wook Fellowship 2019" for **Health Administrators** hosted by the Korea Foundation for International Health (KOFIH), which is a Government affiliated Organization in Korea.

In this regard, the Embassy has the honour to request the ERD to kindly recommend one qualified candidate (criteria for recommendation is attached herewith) for the High-Level Officials Course.

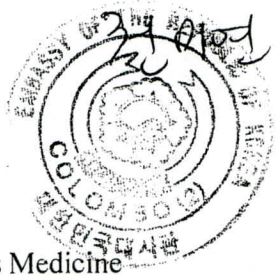
The applicant should be currently working in the health administration field at the Ministry of Health, Nutrition and Indigenous Medicine of Sri Lanka or any other government health authority, to take part in the above training course.

Kindly submit the duly completed application forms attached herewith to the Embassy on or before February 20th 2019.

All related expenses such as airfare, accommodation and training costs will be borne by KOFIH on behalf of the participant. Further information regarding the course could be obtained from the documents attached herewith.

The Embassy of the Republic of Korea avails itself of this opportunity to renew to the External Resources Department (ERD) of the Democratic Socialist Republic of Sri Lanka the assurances of its highest consideration.

Colombo, 19 December 2019



Enclosure: As stated
Cc: Secretary, Ministry of Health, Nutrition and Indigenous Medicine

Korea Foundation for International Healthcare(KOFIH) **2019 Dr LEE Jong-wook Fellowship Program** Selection Plan & Program Information

December 2018



TABLE OF CONTENTS

PART I. INTRODUCTION	
1. KOFIH	3
2. Dr LEE Jong-wook	4
3. Dr LEE Jong-wook fellowship Program	5
PART II. OVERVIEW OF THE SELECTION	
1. Overview of the Selection	6
2. Overview of the Courses	12
PART III. HOW TO APPLY	
1. Application Eligibility	16
2. Application Process	17
3. Interview	19
4. Application Timeline	19
PART IV. PROGRAM CONTENTS	
1. Course Curriculum	20
2. KOFIH Orientation	24
3. KOFIH Workshop	27
PART V. HOSPITALITY SERVICE	
1. Transportation	28
2. Accommodation	28
3. Insurance	28
4. Per-diem	29
5. General Information	29
PART VI. REGULATIONS	
1. Program Guideline	31
2. Others	38
PART VII. CONTACT INFORMATION	
CONTACT INFORMATION	39

PART I. INTRODUCTION

1. About KOFIH

Korea Foundation for International Healthcare (KOFIH) is a public organization affiliated with the Ministry of Health and Welfare of the Republic of Korea. As a leading organization that specializes in healthcare support, we provide government-level aid for partner countries, North Korea, overseas Koreans, migrant workers residing in Korea, and people in disaster-stricken areas across the globe and operate the memorial project to honor the late Dr Lee Jong-wook (6th Director General of WHO).

We will strive to create a better future in which all members of the international community can benefit from necessary healthcare services in close association with the governments of different countries, international organizations, NGOs, and the people of Korea and beyond.

KOFIH aims to contribute to promoting international cooperation and realizing humanitarianism by implementing healthcare assistance programs for developing countries, North Korea, overseas Koreans and immigrant workers in Korea(Article 1 of the Korea Foundation for International Healthcare Act).

01 Mission

To promote international cooperation and uphold humanitarian values by providing healthcare support for less-developed countries, North Korea, overseas Koreans and migrant workers in Korea.

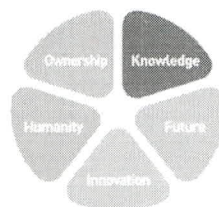


02 Vision

To become a global partner that contributes to the advancement of healthcare around the world.



03 Core Values



We practice compassion for humankind by sharing our healthcare knowledge and expertise based on a proactive, forward-looking, and innovative mindset.

04 Strategic Goals

- Partner for development cooperation aimed at co-prosperity.
- Partner for humanitarian-level healthcare support.
- Partner for the cultivation of healthcare experts.
- Public partner trusted by everyone.



2. About Dr LEE Jong-Wook



Dr LEE was the first Korean to serve as the head of the World Health Organization (WHO). He was truly extraordinary from the beginning. With a great hope to cure more people, Dr LEE worked for WHO for almost 20 years. During his service, Dr LEE archived a great job. He wanted to protect people from various diseases.

Dr LEE Jong-wook Fellowship Program was established to honor his wishes to foster and train healthcare workforce in partner countries



3. ABOUT DR LEE JONG-WOOK FELLOWSHIP

Dr LEE Jong-wook Fellowship Program is an invitational training program that aims to strengthen the capacity of healthcare workforce in partner countries through systematic and practical health and medical education and trainings. It also aims to support partner countries' healthcare strategies and to raise international awareness of excellent healthcare services of the Republic of Korea. The ultimate objective of the Program is to contribute to building a healthy and sustainable global community by expanding the overseas network of domestic medical institutions and developing into a global platform for healthcare workforce training.

Category	Course	Eligibility	Purpose	Period
Training Course for Healthcare Workforce	Clinical Experts	Basic Medical Sciences/ Clinical Professors, Clinical Doctors, Nurses	To enhance the education/healthcare services/research capabilities of healthcare professionals	2~6 Months
	Health Administrators	Officials of the MoH	To enhance the governance capabilities of health administrators	3 Months
	Disease Research Specialists	Disease Researchers	To enhance disease investigation/monitoring / experimental research capabilities	3 Months
	High-Level Officials	Director or higher position at MoH or National tertiary hospital	To enhance the policy and administrative capabilities of high-ranking government officials and managers	1 Week
Training Course for Biomedical Engineers (Intermediate/Advanced)		Medical device technicians working for national/public institutions	To cultivate technical personnel skilled in the use of core medical devices	3 Months

PART II. OVERVIEW OF THE SELECTIONS

1. Overview of the Selections

Country (person)	Course name (period)	Target	No. of Fellows	No. of Recommendations	Target Specialty	Target institution	Training institution
Lao PDR (6 fellows)	Clinical Expert (2 months)	Professor, Health Education Specialists	4	12	Medical/ Health Education	University of Health Science (UHS)	Tertiary referral hospital equipped with training facility
	Health Administrators (3 months)	Administrator	1	3	Administrator	Ministry of Health(National Health Insurance Bureau) / Maternal and Child Healthcare Center	KOFIH, College of Medicine or Graduate School for Public Health, etc
	High-level Officials (1 week)	Director or higher	1	1	Dept. of HR or International Cooperation, etc	Ministry of Health (Central)	KOFIH
Myanmar (6 fellows)	Clinical Expert (6months)	Emergency Physician (Doctor)	2	6	Emergency Medicine	Myanmar Primary Hospital	Tertiary referral hospital equipped with training facility
		Emergency clinical (Nurse)	2	6	Emergency Medicine		
	Health Administrator (3 months)	Administrator	1	3	-	Ministry of Health and Sports, Myanmar	KOFIH, College of Medicine or Graduate School for Public Health, etc
	High-level Officials (1 week)	Director or higher, Rector(1)	1	1	Dept. of HR or International Cooperation, etc	Ministry of Health and Sports (Central), University of Medicine(1)	KOFIH

Country (person)	Course name (period)	Target	No. of Fellows	No. of Recommendations	Target Specialty	Target institution	Training institution
Cambodia (12 fellows)	Clinical Expert (6months)	Histo-pathology (Doctor)	2	6	Dept. of Internal Medicine	Battambang, Pursat, Pailin, SiemReap Provincial Referral Hospital	Tertiary referral hospital equipped with training facility
		Pediatrics (Doctor)	1	3	Dept. of Pediatrics		
		Obstetrics (Doctor)	1	3	Dept. of obstetrics		
	Clinical Expert - Rehabilitation course (2 months)	Orthopedics (Doctor)	2	6	Dept. of orthopedics (1)	Phnom Penh, Battambang Rehab center or Hospital	Tertiary referral hospital equipped with training facility
		Physio-therapist	2	6	Dept. of physiotherapy		
	Administrator	Administrator	1	3	-	Ministry of Health (Central)	
		Administrator	1	3	-	Ministry of Social Affairs, Veterans and Youth Rehabilitation (MoSVY)	
	High-level Officials (1 week)	Director or higher (1)	1	1	Dept. of HR or International Cooperation, etc	Ministry of Health (Central)	
		Director or higher (1)	1	1	Dept. of MOSVY	Ministry of Social Affairs, Veterans and Youth Rehabilitation (MoSVY)	
	Vietnam (1 fellow)	High-level Officials (1 week)	Director or higher	1	1	Dept. of HR or International Cooperation, etc	Ministry of Health (Central)
Sri Lanka (1 fellow)	High-level Officials (1 week)	Director or higher	1	1	Dept. of HR or International Cooperation, etc	Ministry of Health (Central)	KOFIH

Country (person)	Course name (period)	Target	No. of Fellows	No. of Recommendations	Target Specialty	Target institution	Training institution
Mongolia (3 fellows)	Clinical Expert (6 months)	Cardiology (Doctor)	1	3	Dept. of Cardiology	Second General Hospital	Tertiary referral hospital equipped with training facility
		Angiography (Doctor)	1	3	Dept. of Angiography	Second General Hospital	Tertiary referral hospital equipped with training facility
	High-level Officials (1 week)	Director or higher	1	1	Dept. of HR or International Cooperation, etc	Ministry of Health (Central)	KOFIH
Philippines (2 fellows)	Administrator	Administrator	1	3	-	Ministry of Health (Central)	KOFIH, College of Medicine or Graduate School for Public Health, etc
	High-level Officials (1 week)	Director or higher	1	1	Dept. of HR or International Cooperation, etc	Ministry of Health (Central)	KOFIH
Uzbekistan (5 fellows)	Clinical Expert (6 months)	Medical Genetics (Doctor)	2	6	Dept. of Medical Genetics	Tashkent Institute of Medical Education (TIPME)	Tertiary referral hospital equipped with training facility
		Histopathology (Doctor)	2	6	Dept. of Histopathology	National Children's Hospital	
	High-level Officials (1 week)	Director or higher	1	1	Dept. of HR or International Cooperation, etc	Tashkent Institute of Medical Education (TIPME)	KOFIH

Country (person)	Course name (period)	Target	No. of Fellows	No. of Recommendations	Target Specialty	Target institution	Training institution
Ghana (2 fellows)	Administrator	Administrator	1	3	-	Ministry of Health (Central), Ghana Health Service (GHS)	KOFIH, College of Medicine or Graduate School for Public Health, etc
	High-level Officials (1 week)	Director or higher	1	1	Dept. of HR or International Cooperation, etc	Ministry of Health (Central)	KOFIH
Mozambique (5 fellows)	Clinical Expert (6 months)	Emergency Medicine (Doctor)	1	3	Dept. of Emergency Medicine,	Quelimane Central Hospital	Tertiary referral hospital equipped with training facility
		Burn Medicine (Doctor)	1	3	Dept. of Burn Medicine		
		Emergency Medicine (Nurse)	1	3	Dept. of Emergency Medicine,		
		Burn Medicine (Nurse)	1	3	Dept. of Burn Medicine		
	High-level Officials (1 week)	Director or higher	1	1	-	MISAU (Ministry of Health) or Quelimane Central Hospital	KOFIH
Ethiopia (1 fellow)	High-level Officials (1 week)	Director or higher	1	1	-	Jimma University (JU)	KOFIH
Kenya (1 fellow)	High-level Officials (1 week)	Director or higher	1	1	-	KEMSA (Kenya Medical Supplies Authority)	KOFIH

Country (person)	Course name (period)	Target	No. of Fellows	No. of Recommendations	Target Specialty	Target institution	Training institution
Uganda (10 fellows)	Clinical Expert (6 months)	Doctor(2) Nurse(2)	Doctor (2) Nurse (2)	Doctor (6) Nurse (6)	Dept. of Emergency Medicine	Masaka Regional Hospital	Tertiary referral hospital equipped with training facility
	Health Administrators (3 months)	Administra tor	1	3	Dept. of Clinical Service or Manaka Regional Referral Hos, etc	Ministry of Health (Central)	KOFIH, College of Medicine or Graduate School for Public Health, etc
	Disease Research Specialist (TB) (3 months)	Lab Technologist (Intermediate)	2	6	TB	NTRL (National Tuberculosis Reference Laboratory)	National Laboratories, or Medical Research Center
		Lab Technologist (Advanced)	2	6			
	High-level Officials (1 week)	Director or higher	1	1	Dept. of Clinical Service or Manaka Regional Referral Hos, etc	Ministry of Health (Central)	KOFIH
Tanzania (8 fellows)	Clinical Experts (6 months)	Emergency Medicine (Doctor)	1	3	Dept. of Emergency Medicine	Hospital / Health center Of Pwani region	Tertiary referral hospital equipped with training facility
		Obstetrics (Doctor)	1	3	Dept. of Obstetrics		
		Emergency Medicine (Doctor)	1	3	Dept. of Emergency Medicine	Muhimbili National Hospital Mloganzila Campus	
		Obstetrics (Doctor)	1	3	Dept. of Obstetrics		
		Emergency Medicine (Nurse)	2	6	Dept. of Emergency Medicine		

Country (person)	Course name (period)	Target	No. of Fellows	No. of Recommendations	Target Specialty	Target institution	Training institution
	Health Administrators (3 months)	Administrators	1	3	-	MoCDGC (Central)	KOFIH, College of Medicine or Graduate School for Public Health, etc
	High-level Officials (1 week)	Director or higher	1	1	Dept. of HR or International Cooperation, etc	MoCDGC (Central)	KOFIH
Total			63	159			

2. Overview of the Courses

<p>* Number of fellows for recommendation</p> <ul style="list-style-type: none"> - (course 2.1~2.3): must be up to triple of the target number of fellows for each country - (course 2.4, High-level officials): must be recommended equivalent to target number

2.1. Clinical Experts Course

Country (No. of fellows)	LaoPDR(4), Myanmar(4), Cambodia(8), Mongolia(2), Uzbekistan(4), Mozambique(4), Uganda(4), Tanzania(6)
Duration(Period)	<ul style="list-style-type: none"> - 2 months(June 2019~ August 2019) Clinical Experts, Professor course - 2 months(June 2019~ August 2019) Rehabilitation course - 6 months(June 2019~ December 2019) Clinical Experts course <p>*Duration varies by country and course. Schedule is subject to change</p>
Training Institution	<ul style="list-style-type: none"> - Tertiary referral hospital equipped with training facilities - College of Medicine or Graduate School for Public Health
Target Specialty	Dept. of Anatomy Pathology(2), Pediatrics(1), Obstetrics (1), etc
Application Eligibility	<ul style="list-style-type: none"> - 45 years old or younger. - Fluent in reading, writing and speaking in English. - Be able to indicate study goals and motives in the application form. - Must have at least three years of work experience in relevant agency, with excellent job performance, have potential to develop, and provide contribution to your organization. - Must have adequate physical and mental health required to successfully finish the training program. - Must submit the pledge of compliance included in the training regulations with the application form. - Upon the completion of the training program, fellows must agree to work for a period of the discussed at relevant agency. <p>* To be discussed by the KOFIH with the partner countries' MOHs.</p>
Goal	To enhance the educational achievement, healthcare service and research capabilities
Description	<p>Training course for Clinical Experts is a one-on-one training program that offers an individualized curriculum based on fellow's research plan, specialist area, and career. The contents of each curriculum will differ for each fellow.</p> <p>Upon completion of the training program, professor may visit to fellows' hospital to assist applying skills and knowledge acquired in Korea.</p>

2.2. Disease Research Specialists (TB) Course(Uganda)

Country (No. of fellows)	Uganda(4)
Duration(Period)	3 months(June 2019~ Aug 2019) *Schedule is subject to change
Training Institution	- College of Medicine, National Laboratories, or Medical Research Center
Target Institution	NTRL(National Tuberculosis Reference Laboratories)
Target(No. of fellows)	Lab Technologists intermediate(2) Lab Technologists advanced(2)
Target Specialty	TB
Application Eligibility	<ul style="list-style-type: none"> - 45 years old or younger. - Fluent in reading, writing and speaking in English. - Be able to indicate study goals and motives in the application form. - Must have at least three years of work experience in relevant agency, with excellent job performance, have potential to develop, and provide contribution to your organization. - Must have adequate physical and mental health required to successfully finish the training program. - Must submit the pledge of compliance included in the training regulations with the application form. - Upon the completion of the training program, fellow must agree to work for a period of the discussed at relevant agency. * To be discussed by the KOFIH with the partner countries' MOHs.
Goal	- To enhance the foreign fellows' abilities through the training of advanced technology of Korean tuberculosis laboratories.
Description	<ul style="list-style-type: none"> - TB Management 101 - TB Testing 101 - Training in Intensive Laboratory aspects of Research(Smear, Culture, Drug susceptibility, Molecular examination, etc) - Training in Intensive Public Health aspects of Research(Fundamentals of epidemiology and TB epidemiology), TB Project Planning - Training in Collection and management of TB patient information and cohort analysis - Training in TB project monitoring and evaluation - Upon completion of the training program, professor may visit to fellows' institute to assist applying skills and knowledge acquired in Korea.

2.3. Health Administrators Course(7 countries 8 fellows)

Country (No. of fellows)	Lao PDR(1), Cambodia(2), Myanmar(1), Philippines(1), Ghana(1), Uganda(1), Tanzania(1)
Duration(Period)	3 months(June 2019~Aug 2019) *Schedule is subject to change
Training Institution	- KOFIH, College of Medicine or Graduate School for Public Health, etc
Target Specialty	Ministry of Health, Ministry of Social Affairs Veterans and Youth Rehabilitation, etc
Target	Health Administrators
Application Eligibility	<ul style="list-style-type: none"> - 45 years old or younger. - Fluent in reading, writing and speaking in English. - Be able to indicate study goals and motives in the application form. - Must have at least three years of work experience in relevant agency, with excellent job performance, have potential to develop, and provide contribution to your organization. - Must have adequate physical and mental health required to successfully finish the training program. - Must submit the pledge of compliance included in the training regulations with the application form. - Upon the completion of the training program, fellow must agree to work for a period of the discussed at relevant agency. * To be discussed by the KOFIH with the partner countries' MOHs.
Goal	<ul style="list-style-type: none"> - To acquire knowledge on the development of the Korean healthcare system and apply it to the implementation of health policies. - To build a network among the partner countries for sustainable-development. - To be able to apply the health policy expertise acquired by the training program in Korea for improving the healthcare systems of fellows' countries.
Description	<ul style="list-style-type: none"> - Training in Basic Health Science(Epidemiology, Research Methodology, Health Ethics, ICT) - Training in Korean Healthcare systems(Policy planning, insurance system, E&M, Field trips) - Training in Hospital Management(Strategic hospital management, hospital infection management, PR) - Training in Leadership(Global ODA and Global Health trends, etc) <p>Upon completion of the training program, professor may visit to fellows' institute to assist applying skills and knowledge acquired in Korea.</p>

2.4. High-level Officials Course(14 countries 15 fellows)

Country (No. of fellows)	Lao PDR(1), Cambodia(2), Myanmar(1), Vietnam(1), Sri Lanka(1), Mongolia(1), Philippines(1), Uzbekistan(1), Ghana(1), Mozambique(1), Uganda(1), Ethiopia(1), Kenya(1), Tanzania(1)
Duration(Period)	1 week(4th week of May 2019)
Training Institution	- KOFIH
Target Specialty	Central Ministry of Health, National tertiary hospital, etc
Application Eligibility	<ul style="list-style-type: none"> - Director or higher position at the Ministry of Health(Central) - Director or higher position at the Dept. of HR or International Cooperation(Central) - Vice-president or higher position at the National tertiary hospital - Be able to indicate study goals and motives in the application form. - Must have at least three years of work experience in relevant agency, with excellent job performance, have potential to develop, and provide contribution to your organization. - Must have adequate physical and mental health required to successfully finish the training program. - Must submit the pledge of compliance included in the training regulations with the application form. - Upon the completion of the training program, fellow must agree to work for a period of the discussed at relevant agency. * To be discussed by the KOFIH with the partner countries' MOHs.
Goal	<ul style="list-style-type: none"> - To contribute to the improvement of the partner countries' healthcare system based on the experience of developing Korea's national healthcare system - To strengthen the partnerships by enhancing the understanding of KOFIH's healthcare cooperation projects with developing countries.
Description	<ul style="list-style-type: none"> - Field-trip orientated Course - The history of Korea's healthcare development, including visits to the National Museum of Korean Contemporary History and the Future Healthcare Exhibition Center - Health policy-related agencies and the Osong Health Technology Administration Complex - A tour among the top ten medical institutions in Korea such as Asan Medical Center, Yonsei University Health System, Samsung Medical Center, Seoul National University Hospital, etc

* For the course for High-level Officials, no recommendation letter nor interview is need

PART III. HOW TO APPLY

1. APPLICATION ELIGIBILITY

1.1. Course 2.1 ~ 2.3

- Those who were born after 1st January of 1973
- Fluent in reading, writing, and speaking in English
- Be able to indicate study goals and motives in the application form
- Must have at least three years of work experience in relevant agency, with excellent job performance, have potential to develop, and provide contribution to your organization
- Must have adequate physical and mental health required to successfully finish the training program
- Must submit the pledge of compliance included in the training regulations with the application form
- Upon the completion of the training program, fellow must agree to work for a period of the discussed at relevant agency

* To be discussed by KOFIH with the partner countries MoHs

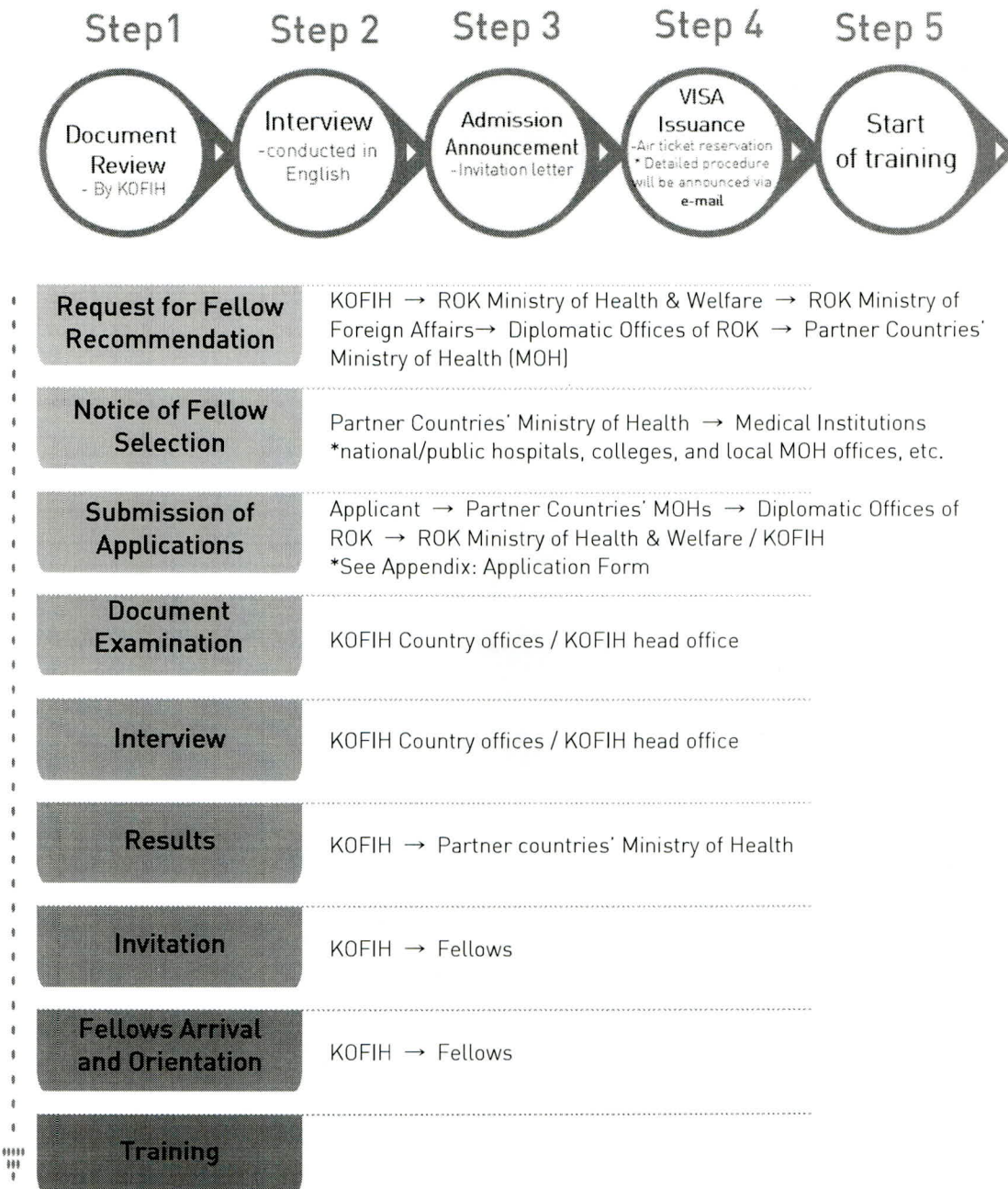
1.2. Course 2.4 (High-level Officials Course)

- Director or higher position at the Ministry of Health
- Director or higher position at the Dept. of HR or International Cooperation (Central)
- Director or equivalent level at the National tertiary hospital
- Be able to indicate study goals and motives in the application form
- Must have at least three years of work experience in relevant agency, with excellent job performance, have potential to develop, and provide contribution to your organization
- Must have adequate physical and mental health required to successfully finish the training program
- Must submit the pledge of compliance included in the training regulations with the application form
- Upon the completion of the training program, fellow must agree to work for a period of the discussed at relevant agency

* To be discussed by KOFIH with the partner countries MoHs

2. APPLICATION PROCESS

2.1. The decision process takes about 2~3 months. The detailed schedule varies from each training course. For further details, please contact the person responsible for the course.



2.2. Required Documents(Supplementary)

- 1) Completed Application Form
- 2) Copy of Certificate of Degrees
- 3) Copy of employment certificate
- 4) Health examination documents
- 5) Copy of valid passport
- 6) Recent Identification Photo of yourself (3cm×4cm) *taken in last 6 months
- 7) Pledge Statement on Compliance with Fellowship Guidelines
- 8) License certificate
- 9) Comprehensive (physical) Medical Examination Report
- 10) Agreement on the Collection Use of Personal Information and/or etc.

2.3. Important Notes for All Applicants:

- 1) All forms must be **typed in English** and all the supplementary documents should be **in English**. Documents in any other language should be accompanied by a notarized English translation.
- 2) Original documents should be submitted. However, should they be unavailable, copies must be authorized by the originating institution before they are submitted.
- 3) If any of the submitted materials contain false information, admission will be rejected.
- 4) Uncompleted application forms and supplementary documents will be considered as disqualified from the admission process.
- 5) Applicants should take full responsibility for any disadvantage due to the mistakes or omissions on the application.

3. INTERVIEWS

- An interview will be conducted only for the applicants who have qualified the application review.
- A phone interview or a face-to-face interview will be conducted in English.
- The main goal of the interview is to evaluate applicants' competency and English proficiency in both speaking and listening required to successfully finish the training program
- With KOFIH evaluation tool, we will evaluate applicants' training goals, leadership potential, etc.
- Detailed timeline and process will be individually notified via e-mail.

4. APPLICATION TIMELINE

4.1. Course 2.1~2.3

Process	Deadline
Application Submission <i>*submission to your MoH</i>	Feb 28 2019
Application Review	Within 2 weeks from #1
Interview	Within 2 weeks from #2
Decision Notification	Within 1 weeks from #3
VISA Issuance	2 months taken
Start of Training	2 nd week of June

4.1. Course 2.4 (High-Level Officials Course)

Process	Deadline
Application Submission <i>*submission to your MoH</i>	Feb 26 2019
Application Review	Within 2 weeks from #1
Decision Notification	Within 1 weeks from #2
VISA Issuance	2 months taken
Start of Training	2 nd week of May

* Please note that the dates are subject to change.

* Admissions decision will be notified to your individual e-mail.

* Deadline for Application: All required documents must arrive at the KOFIH headquarter in Seoul, Korea. Local deadlines may differ in each country so please make sure to confirm with the KOFIH staff in charge

PART IV. Program Contents

KOFIH's Training curriculum is a one-on-one training program that offers individual curriculum based on fellow's research plan, specialist area, and career. The contents of each curriculum will differ for each fellow. In this document, we provide program curricula designed in 2017.

1. Course Curriculum

1.1. Training Course for Clinical Experts (2018)

Pre-Training	Language Education		Temporary academic advisors' visit to localities	
	<ul style="list-style-type: none"> ■ Basic Korean Language ■ Basic Medical Terms 		<ul style="list-style-type: none"> ■ In-depth interviews with agencies/trainee candidates ■ Basic Establishment of demand-based education plans/goals 	
Invitational Training	Common Education Content		Specialty Education	
	<ul style="list-style-type: none"> ■ Basic Korean Language ■ Research/Training Plans and Thesis ■ Writing Skills ■ Professional Leadership ■ General Medicine and Research ■ Methodology 		Individual Education <ul style="list-style-type: none"> ■ Individual competency-customized education 	Clinical Education <ul style="list-style-type: none"> ■ Clinical observation ■ Participation in conferences /academic gatherings ■ Experiment and practical classes Z
	Other Education Programs		Education Evaluations	
	Research Activities <ul style="list-style-type: none"> ■ Thesis Writing ■ Translation of Textbook Writing 	Common Academic Workshops <ul style="list-style-type: none"> ■ Presentation of Research and Training Results 	Trainee evaluation	Academic advisor evaluation
Post-Training	Post-Training		Post Evaluation *Implemented within 6 months of the end of invitational training programs	
	<ul style="list-style-type: none"> ■ Dispatch of experts to partner countries ■ Local academic workshops and education ■ Support for common laboratory installation and facilities 		<ul style="list-style-type: none"> ■ Local site visits and evaluation ■ E-mail surveys (evaluation of training satisfaction and academic advancement) 	

1.2. Training Course for Disease Specialists (2018)

Week	Module	
	TB Research	
1	TB Management 101	
2		
3	TB Testing 101	
4		
5	Intensive Testing Research - Smear - Culture - Drug susceptibility - Molecular examination	Intensive Health Research - Fundamentals of epidemiology and TB epidemiology. - TB project planning - Collection and management of TB patient information and cohort analysis - TB project monitoring and evaluation
6		
7		
8		
9		
10	Evaluation	
11		
12		

1.3. Training Course for Health Administrators (2018)

Week	Module	
	Common Training	Individual Training
1	KOFIH Orientation	Diagnosis and individual planning
2	Basic Health Science	- Seminars - Guidance by advisor (professor) - Writing reports on the selected practical classes - Independent Studies
3	- Access to Emergency Care - Adults and Elderly Health Policy	
4	- Communicable Diseases and Management - Maternal, Neonatal & Child Health Policy - NCD Policy & Management	
5	Korean Healthcare Systems - Korean healthcare systems and policies - Korean health insurance systems - Field trips	
6	- Legislation on Public health - Health Information System (Informatics)	
7	Hospital Management	
8	- Strategic hospital management - Hospital infection management	
9	- Health and PR	
10	Global Leadership - Korean NGOs and global health - Global health trends	
11	- Global ODA trends - Governance & Negotiation Skills	
12	Evaluation	Proposal Presentations

1.4. Training Course for High-Level Officials (2018)

Day	Contents
Arrival	Arrival at Incheon International Airport and move to the Hotel
1st day	Orientation
	Introduction of Dr LEE Jong-wook fellowship Program: Outcomes and Future Plans Introduction of KOFIH Development Cooperation Projects to Developing countries
	Lectures
	Strategic Purchasing and Optimum Use of Available Resources 1) Participatory Benefit Package Management and Payment System (NHIS) 2) Making regulations, Monitoring & Feedback, Infrastructure Management (HIRA)
2nd day	Field Trip
	Experiencing Korea's advanced medical check-up system (participants will get opportunities to receive personal medical test including laboratory blood test, X-ray, ultrasound, gastroscopy and etc.) Visiting a major medical institution
	Lectures
	Management and operational system of tertiary level hospital 1) Strategic placement of high technology equipment, medicine and medical supplies 2) Management of the hospital financial system 3) Capacity strengthening for health staffs 4) Strategies to improve the hospital management capacity
3rd day	Field Trip
	Visiting a major medical institution Visiting a medical college to understand the medical education system in Korea
	Field Trip
	Visiting major pharmaceutical company or medical equipment company
4th day	Field Trip
	Visiting major pharmaceutical company or medical equipment company
	Field Trip
	Understanding the Emergency Medical Response System in Korea 1) Seoul Metropolitan Fire & Disaster Headquarter 2) Emergency Medical Center
5th day	Medical Korea Forum Participants: From government officials to healthcare providers, insurance companies, medical tourism facilitators, digital health companies, healthcare associations, and other related to global healthcare business Program: G2G Summit, Conference, Exhibition, Business Meeting, or etc. A completion ceremony and gala dinner
6th day	Korea Culture Tour
7th day	Departure

* Schedules above are subject to change

2. KOFIH Orientation (2018)

Day 01

DATE / TIME	PROGRAM	LOCATION
1st day	2017 Fellows Arrivals & Check-in	Residence
<p>● Fellows Arrivals & Check-in There'll be no schedules on the first day. Our staffs will help you with check-in and registration upon your arrivals at the residence. Should you have any inquiry or need assistance, please do not hesitate to ask or whatsapp us.</p>		

Day 02

DATE / TIME	PROGRAM	LOCATION	
2nd day	08:30	Gathering in the lobby	Residence
	09:00	Transfer	Shuttle Bus
	10:00-13:30	2017 Fellowship Opening Ceremony & Luncheon	Schubert Hall, Hotel President
	14:00-17:00	Introduction of The Dr LEE Jong-wook Fellowship & KGA Introduction of KOFIH Projects	
	17:30-19:00	Dinner	Offsite
	19:30	Rest	Residence

Day 03

DATE / TIME	PROGRAM	LOCATION	
3rd day	08:30	Gathering in the lobby	Residence
	09:00	Ground Transfer	Shuttle Bus
	09:30-12:00	Presentation of Country Reports	Mozart Hall, Hotel President
	<p>● Country Report If there is any change on your presentation slides, please make sure to submit and confirm the final version of your slides before the Orientation starts. Also, please kindly inform us if you are using any media contents (Audio, Video clip, and so on.) or require internet connection during your presentation.</p>		
	12:00-13:00	Lunch (Buffet)	Hotel President
	13:00-14:30	Ground Transfer	Shuttle Bus
	14:30-17:00	Site Visit at KOFIH Medical Resources Center	KOFIH Medical Resources Center
	17:30-19:00	Dinner	Offsite
	19:30	Rest	Residence

Day 04


DATE / TIME	PROGRAM	LOCATION	
4th day	08:30	Gathering in the lobby	Residence
	09:00	Ground Transfer	Shuttle Bus
	09:30-12:00	Presentation of Country Reports	Brahms Hall, Hotel President
	12:00-13:30	Lunch (Korean)	Hotel President
	13:45-16:30	Korean Daily Conversation Class	Brahms Hall, Hotel President
	17:30-19:00	Dinner	Offsite
	19:30	Rest	Residence

Day 05


DATE / TIME	PROGRAM	LOCATION	
5th day	08:00	Gathering in the lobby	Residence
	08:30	Ground Transfer	Shuttle Bus
	09:00-12:00	The mission of healthcare professionals in developing countries	Brahms Hall, Hotel President
	12:00-13:00	Essential Survival Skills	Hotel President
	13:00-14:00	Lunch (with guide staffs)	Offsite
	14:00-17:00	Korean Lifestyle Experience: Subways, Super Markets, etc.	Offsite


<p>● Korean Lifestyle Experience: Subways, Super Markets Please, wear comfortable clothes and sneakers. We'll break in to 12 groups and experience Korean lifestyle outdoor.</p>		
17:00-18:00	Dinner in groups	Offsite
18:00-19:00	Transfers in groups	Public Transportation
19:30	Gathering in the lobby, Rest after call the rolls	Residence

Day 06

DATE / TIME	PROGRAM	LOCATION	
06:45	Gathering in the lobby	Residence	
07:00	Ground Transfer	Shuttle Bus	
7:30-12:00	Health Examinations for the Fellows	Korea Healthcare Association	
<p>● Health Examinations for the Fellows Please have light dinner on Oct. 19th for the health examinations on Oct. 20th. The health examinations will be started at 07:30 a.m. on Oct. 20th, so please do not eat any food or drinks including water after 06:00 in the morning until your health examinations finish.</p>			
12:00-13:00	Lunch	Offsite	
14:00-17:00	Introduction to development experience and modern history of Korea (Explanation Tour from 15:00)	National Museum of Korean Contemporary History	
6th day	 <p>The National Museum of Korean Contemporary History is Korea's first museum recording the nation's comprehensive history from the late nineteenth century to current time. It opened on December 26, 2012 and was established to share the nation's history of going through all kinds of hardships and troubles by showing them with exhibitions, education, researching and developing and collecting materials. The museum is comprised of four exhibition halls; Prelude to the Republic of Korea, Foundation of the Republic of Korea, Development of the Republic of Korea, and Modernization of South Korea, toward the World. Also, Children's Museum offers special exhibitions throughout modern time's history and educational and cultural programs for students.</p>		
	17:30-19:00	Dinner	Offsite
	19:30	Rest	Residence

Day 07

DATE / TIME	PROGRAM	LOCATION	
14:30	Gathering in the lobby	Residence	
15:00	Ground Transfer	Shuttle Bus	
15:30-19:30	Korean Traditional Cultural Experience: Making Korean Traditional Mask, Korean Buffet, Korean Traditional Performance "Simcheongee"	Korea House	
7th day	 <p>The Korea House was opened in 1981. It is a traditional Korean building that introduces the culture and lifestyle of Koreans, where you can experience traditional architecture and a classical atmosphere. The building was built in the style of the Joseon Dynasty's Jagyeong-jeon building at the Gyeongbok Palace. It is the only building built in the traditional architectural style. You will feel its antiquity as you enter the building. It is divided into the Haerin-gwan (a space for people to get acquainted with each other), the Traditional Theater, and three annex buildings (Munhyang-nu, Nakeum-jeong and Cheongwu-jeong). At Haerin-gwan, you can enjoy traditional music at Garak-dang and try traditional food at Sohwa-dang. In the square of Garak-dang you can view a traditional wedding (on the weekends) or people playing folk games. Also, at the Traditional Theater, about 156 seats are available, and in the afternoons Human Cultural Assets or members of the National Center for Korean Traditional Performing Arts and the National Corps members present traditional music and dances. Sinayui, Salpuri, Pansori, the Drum Dance and the Bongsan Mask Dance are the most popular programs for foreigners. The programs are all explained in English and Japanese.</p>		
	19:30-20:30	Visit Namsangol Night Market	Namsangol Hanok Village

		<p>Namsangol Hanok Village opened in 1998 on the north side of Namsan Mountain in the center of the capital. This village has five restored traditional Korean houses, a pavilion, traditional garden, performance arts stage and a time capsule plaza, making it a perfect spot for both locals and tourists to take a leisure walk. Upon entering from the front gate, visitors will get a taste of the traditional life while escaping from the bustling city life of modern times. The traditional garden with its pavilion and the traditional houses create a peaceful ambiance before the forested Namsan Mountain. The five hanok houses were remodeled after the traditional houses of Joseon Dynasty and over a range of social classes, from peasants to aristocrats. The furniture in the houses is arranged to help guests understand the daily lives of the past, and the clean, traditional houses, as well as their antique items provide a great photo op. To protect these fragile heritages, only one of the hanok houses is open to the public. The house of Yoon-ssi of Okin-dong has been transformed into Yoon's Tearoom, where guests can enjoy traditional tea and refreshments.</p>					
	<table border="1" style="width: 100%;"> <tr> <td style="width: 20%;">20:30-21:00</td> <td style="width: 40%;">Ground Transfer</td> <td style="width: 40%;">Shuttle Bus</td> </tr> <tr> <td>21:15</td> <td>Rest</td> <td>Residence</td> </tr> </table>	20:30-21:00	Ground Transfer	Shuttle Bus	21:15	Rest	Residence
20:30-21:00	Ground Transfer	Shuttle Bus					
21:15	Rest	Residence					

Day 08

DATE / TIME	PROGRAM	LOCATION
8th day	Rest / Free Time	
<p>● Free Time Herewith some places you might want to visit to spend your free time in Seoul. Please visit http://asiaenglish.visitkorea.or.kr/ena/index.kto for more information. ** Seoul Call Center: +82 2 120 + 9 (http://120dasan.seoul.go.kr/foreign/english.html)</p>		

Day 09

DATE / TIME	PROGRAM	LOCATION	
9th day	09:00	Gathering in the lobby & Check-out	Residence
	<p>● Gathering in the lobby & Check-out Please, pack your luggage and bring them with you to check-out. We'll check-out when all fellows gathered in the lobby. We won't come back to the residence to check-out after lunch. All fellows will be dismissed after lunch in to each institute.</p>		
	10:00	Ground Transfer	Shuttle Bus
	10:30-12:00	Orientation Evaluation	Brahms Hall, Hotel President
	12:00-13:00	Lunch	Hotel President
	14:00	Transfer	Each training institutes

* Accommodation and schedule is subject to change according to 2019 selection plan.

3. KOFIH Workshop (2018)

3.1. During the program, KOFIH provides a workshop that brings all the fellows from different courses together. The detailed workshop program is as follows.

Date	Time	Program	
12.6.(W) Day 1	13:50-16:32	Haengsin→Busan(KTX295)	*Tickets will be sent to individual email by Dec 4th
	14:00-16:27	Seoul→Busan(KTX137)	
	14:45-16:27	Osong→Busan(KTX137)	
	17:00-18:30	Arrival to Busan & Check-in	
	18:30-19:30	Dinner	
	19:00-21:00	Module 1: Promoting the sustainability of training - Progress on KOFIH Global Alumni(KGA) and Alumni Group Arrangements	
	21:00	Rest	
12.7.(Th) Day 2	8:00-9:00	Breakfast	
	9:30-11:30	Module 2: Management and Operational Strategies of Hospital - Strategic placement of healthcare workforce, medical equipment, and supplies - Strategies to improve the hospital management capacity	
	12:00-13:30	Lunch	
	14:00-16:00	Module 3: Healthy Health for Each - Roles & Responsibilities of Leader in Healthcare Field	
	17:30-18:30	Dinner	
	19:00-20:30	Haeundae Light Festival	
	21:00	Rest	
12.8.(F) Day 3	8:00-9:00	Breakfast	
	9:00-9:30	Check-out	
	9:30-12:00	Field Trip	
	12:00-13:00	Lunch	
	14:00-15:53	Busan→Osong(KTX136)	Transfer to each training institutes
	14:00-16:45	Busan→Seoul(KTX136)	
	14:00-17:10	Busan→Haengsin(KTX136)	

* Detailed program may be subjected to change

PART V. HOSPITALITY SERVICE

1. Transportation

- 1.1. Airport Pick-up and drop service will be provided. Please check-in your name with greeting staff, and the staff will guide you to the vehicle. We have hired private vehicles and made groups to share the vehicles. So we ask you for kind understanding for waiting in the hall until all participants to join the group for the assigned vehicle.
- 1.2. Program Shuttle Bus The Opening Ceremony and Orientation will take place at Hotel, and during the program, a shuttle bus will be operated among the venues. Meeting point and Pick-up time will be announced upon your arrivals in Korea.

2. Accommodation

- 2.1. All participants will stay at the same hotel upon your itinerary. KOFIH will ONLY provide your accommodation. Please note that any incidental payment, such as mini bar, room services, international calls, and etc., during your stay at the residence will be your own expense. The check-in time and check-out time differs from hotel to hotel. Please kindly note that the early check-in is provide.
- 2.2. High-level Course will be provided with other designated hotel. Detailed information will be announced to the selected fellows.

3. Insurance

- 3.1. During the program, participants will be covered by the overseas travelers' health insurance. The insurance covers expenses for medical treatment and hospital care caused by diseases or accidents within the scope and limit of insurance coverage. In the case of using the medical treatment or hospital care, the participants should pay by themselves at first and parts covered by the insurance will be reimbursed later.
- 3.2. Detailed scope of coverage will be noticed after the fellow selection process ends.

4. Per-Diem

- 4.1. During the training program, KOFIH will provide daily per diem. The per-diem for KRW is 50,000won. During the orientation, KOFIH will provide the daily per-diem, excluding the meal allowance.
- 4.2. After you begin training program in the training institute, training institute will provide the fellows' per-diem.

5. General Information

5.1. Weather

The climate in Seoul during May~June can be summarized as warm, humid and wet. June is in the summer and is typically the 3rd warmest month of the year. Day time maximum temperature average round a muggy 26°C (79°F), whilst at night 17°C (63°F) is normal.

5.2. Currency

Korea's official monetary unit is the won. The Korean currency consists of a ten thousand, fifty thousand, and one thousand won note, and five hundred, fifty and ten won coins. One U.S dollar is roughly equivalent to 1,200 won.

5.3. Smoking

Smoking is not allowed in all public buildings throughout Korea, including hotels and most restaurants.

5.4. Tipping

Tipping is not regular practice in Korea. Service charges are included in your bill for rooms, meals and other services at the residence and others.

5.5. Tax

Value-added tax (VAT) is 10 percent levied on most goods and services.

Information on tax refund may be found at:

http://english.visitkorea.or.kr/enu/SH/SH_EN_7_1_4.jsp

5.7. Electricity & Voltage The standard voltage in Korea is 220 volts.

5.8. Emergency Call

Police: 112 / Fire Department: 119/ Medical Emergencies: 1339

Seoul Call Center: +82 2 120 + 9

(<http://120dasan.seoul.go.kr/foreign/english.html>, provides foreigners, travelling through and living in Seoul with variety of information services about life, transportation, and tourism services)

PART VI. REGULATIONS

1. Guideline for Dr LEE Jong-wook Fellowship Program (2019)

*Guidelines are updated each year, 2019 fellows are supposed to follow 2019 guidelines. Kofih will announce 2019 guidelines upon your arrival.

Article 1 (Purpose) Purpose of this guideline is to set forth obligations and others that the Fellows of Dr LEE Jong-wook Fellowship should comply with which is implemented by the Korea Foundation for International Healthcare (hereinafter “KOFIH”) under Article 7 of the Act on the Korea Foundation for International Healthcare and Article 4 of the Articles of Association.

Article 2 (Definition of terms) Terms used in this guideline are defined as follows:

1. “Fellow” means those who participate in Dr LEE Jong-wook Fellowship after being selected as a fellow of the Fellowship supported by the KOFIH.
2. “Training institution” means a healthcare agency selected and commissioned by the KOFIH for the training of Fellows.
3. “Relevant authorities” mean institutions who are related to the implementation of Dr LEE Jong-wook Fellowship, and include ministries and agencies of the Korean government, Dr LEE Jong-wook Fellowship Steering Committee and faculty of the training institution, and the ministry of health and the organization of the country Fellow belongs to.

Article 3 (Compliance by Fellows) Fellows should comply with the conditions and instructions required relating to Dr LEE Jong-wook Fellowship by the Ministry of Health and Welfare, KOFIH and teaching medical institution.

1. Fellow should participate in the Fellowship in the year training is offered. (Deferral is not allowed)
2. Upon receiving the notice of admission to Fellowship, Fellow should submit to the KOFIH the Pledge Statement on Compliance with Fellowship Guideline in [Annex 1].
3. If Fellow voluntarily gives up the participation even after being selected, s/he may not re-apply for Dr LEE Jong-wook Fellowship for the following 5 years.
4. Fellow should agree to KOFIH collecting information concerning him/her and passing such information onto other relevant parties. Information includes the Fellow’s application, pledge statements with signature, and all other information submitted to KOFIH in relation to Dr LEE Jong-wook Fellowship training program.
5. Fellow, in principle, will be trained in the training institution designated by KOFIH.
6. Fellow will participate in the training under the guidance and supervision of the training institution during the Fellowship, and consult with the teaching professor and Dr LEE Jong-wook Fellowship Steering Committee of the training institution on the study, life and other related matters.

7. Fellow should faithfully participate in the training under the guidance of the teaching professor and instructors designated by Dr LEE Jong-wook Fellowship Steering Committee of the training institution and of the instructors designated by the teaching professor, and should endeavor to achieve satisfactory academic progress.
8. Fellow will proactively participate in all activities and occasions associated with the training including lectures and tutorials, submit all assignments required by the teaching professor and other instructors, and observe the guideline of the training institution for attendance management.
9. Fellow will participate in all evaluation programs conducted by KOFIH and training institution in relation to the Fellowship.
10. Fellow will prepare reports (training progress report, result report, etc.) required by KOFIH and training institution in relation to the Fellowship according to the given guidelines, and submit or give a presentation within the due date.
11. Fellow will immediately inform the teaching professor and Dr LEE Jong-wook Fellowship Steering Committee of the training institution of any personal or family circumstances such as health problems or family problems which may seriously affect the study during the Fellowship.
12. Fellow, in principle, will not purchase personal vehicles with their allowances provided by KOFIH due to safety concerns and concentration on the study.
13. In cases where Fellow does not follow Article 3 (Compliance by Fellows) during the Fellowship in Korea and is considered substantially poor in the training performance, Dr LEE Jong-wook Fellowship Steering Committee of the training institution will issue a warning to the Fellow after consultation with the teaching professor.

Article 4 (Vacation) Fellow may have vacation within the period designated as the followings on the condition that it does not affect the study and Fellow obtains prior approval from the training institution.

1. Fellow may have paid-leave within 2 weeks a year (for 1-year training) or within 1 week a year (for 6-9 month training) or within 3 days a year (for 3-month training) including holidays for which per diem is provided. This includes Fellow's visit to the home country for personal reasons or trip abroad.
2. Before using a vacation, Fellow should obtain prior approval from his/her teaching professor, notify such to the Dr LEE Jong-wook Fellowship Steering Committee, and report to the teaching professor immediately after returning from the vacation.
3. KOFIH and training institution will not pay any other allowances (visa, airfare, accommodation, etc.) than those stated in Paragraph 1 of Article 4 for the personal trip to the home country or personal trip in and outside Korea made during the vacation.
4. If vacation exceeds the period designated for vacation, per diem is not provided for the exceeded number of days and they will be considered as absent.
5. Fellow is not allowed to leave early for the home country before the completion of Fellowship by using vacation around the time of Fellowship closing.

Article 5 (Temporary departure)

1. Fellow, in principle, will refrain from temporary departure during the Fellowship except visit to the home country, overseas trip in relation to Dr LEE Jong-wook Fellowship under the guidance of teaching professor or training institution (attendance in academic conference overseas, Fellowship consulting in the home country, etc.), and visit to the

- home country or overseas trip during the vacation for which prior approval is obtained.
2. Fellow who departs temporarily during the approved vacation should obtain prior approval of teaching professor and submit the Pledge Statement in [Annex 2] to Dr LEE Jong-wook Fellowship Steering Committee of the training institution. If Fellow departs temporarily despite disapproval of the teaching professor, per diem for the relevant period is suspended or refunded, and s/he will get a warning from Dr LEE Jong-wook Fellowship Steering Committee of the training institution.

Article 6 (Accommodation)

1. Fellow will reside in the accommodation designated by the training institution during the Fellowship and may not change the accommodation provided by training institution without permission (Environment of the accommodation may vary depending on the training institutions assigned).
2. Fellow should primarily follow the policy set by the training institution for the environment and management of the accommodation provided by the training institution. If change is necessary, Fellow should have a consultation with the training institution to make a decision.
3. If Fellow resides in the commune accommodation which is shared with other Fellows, cohabiting with persons other than Fellows for the long term is prohibited in principle. If necessary, Fellow is required to have a prior consultation with training institution to determine entrance permission.
4. Major furnishings and appliances of the accommodation which are damaged or lost by Fellow's intention or negligence should be compensated to their original state in principle.

Article 7 (Per diem)

1. Per diem for Fellow's stay in Korea is paid in accordance with the payment standard of KOFIH, and by training institution in the way decided by Steering Committee of the training institution.
2. In case of Fellow's delayed arrival, returning to the home country in the middle of Fellowship, etc. KOFIH and training institution will pay per diem after cutting the amount for the relevant days. When the per diem is already paid, the amount for the relevant days may be collected from the Fellow.
3. If Fellow arrives in Korea before the Fellowship starting day designated by KOFIH, the per diem for such days will not be paid.

Article 8 (Supporting, accompanying or inviting family)

1. KOFIH and training institution will not provide any support for the dependents of the Fellow in his/her home country.
2. If Fellow should invite necessarily his/her family for temporary stay during Fellowship, s/he must consult this with Dr LEE Jong-wook Fellowship Steering Committee of the training institution. Training institution may not approve such temporary stay of inviting family when it is considered to affect the Fellow's study. If Fellow does not follow such decision, s/he will get a warning from Steering Committee of the training institution.
3. When Fellow brings his/her family for temporary stay in Korea after obtaining prior approval of the training institution, KOFIH and training institution will not be responsible for safety and security of such family during their stay in Korea, and will not provide any

support relating to the invitation and stay.

Article 9 (Withdrawal)

1. Fellow, in principle, is not allowed to withdraw from the Fellowship at his or her discretion once the training starts (including local preliminary training).
2. Fellow may withdraw from the Fellowship with valid personal reasons or issues from his/her home country (health problems, disaster in home country, etc.), if training institution obtains approval from KOFIH after consultation between the Fellow and training institution. In this case, Fellow may not re-apply for Dr LEE Jong-wook Fellowship for the following 5 years.
3. Fellow who withdraws from the Fellowship at his/her discretion may not apply for Dr LEE Jong-wook Fellowship or other educational programs of KOFIH in the future.

Article 10 (Warning and status suspension)

1. If Fellow gets warnings from the training institution at least the number of times below, payment of his/her per diem is suspended, and warning is issued to suspend the Fellow status.

Training period	1 year	6-9 months	2--3 months
No. of warnings	4 times	3 times	2 times

2. If Fellow gets warnings from the training institution at least the number of designated times under Paragraph 1 of Article 10 and warning is issued to suspend the Fellow status, the training institution holds the Deliberation Committee which involves the KOFIH, and deliberates and decides the suspension of the Fellow status. When such suspension is decided, KOFIH may order him/her to return to the home country even before Fellowship ends with the notice of restriction on the Fellowship participation. Relevant authorities including the agency the Fellow works for and Ministry of Health in the country of the Fellow will also be informed as such.
3. Fellow may not be involved in political activities or employed in any form for personal profit in Korea. In case of violation, KOFIH may suspend the Fellow status and accordingly order him/her to return to the home country.
4. If Fellow's training or status is suspended under Article 9 (Withdrawal) and Article 10 (Warning and status suspension), s/he may not apply for Dr LEE Jong-wook Fellowship or other programs of KOFIH in the future.

Article 11 (Returning home and to original job post) Fellow will return to the home country upon completion of the Fellowship program.

1. Fellow may not extend the length of the training program or stay for personal convenience. Neither KOFIH nor training institution will provide any assistance and be responsible for an extension of his/her stay.
2. Fellow should either return to his/her original job post or remain employed in a relevant field for at least 5 years in the home country. If Fellow fails to comply with this obligation, KOFIH may request the refund of part of training cost to the Fellow after consultation with the Ministry of Health and the agency the Fellows works for in the country of the Fellow.

3. Fellow, after returning home, will proactively participate in any training and activities (including local refresher training and consulting, evaluation on application of the techniques learned, alumni activity) which will take place related to Dr LEE Jong-wook Fellowship in the local settings.

Article 12 (Others)

1. KOFIH will not provide any insurance support outside the limit and period covered by the health and damage insurance provided for the Fellows.
2. KOFIH will not take any responsibility for damage or loss of the individual, intentional negligence, matters irrelevant to the Fellowship, or disease, injury or death of the Fellow from previous medical history, which may occur in the process of arrival and departure, and during the Fellowship.

Addendum

Article 1 (Enforcement date) This Guideline takes effect from the date of approval of KOFIH President.

[Annex 1]

Pledge Statement on Compliance with Fellowship Guideline

President of the Korea Foundation for International Healthcare (KOFIH)

Fellow's Name:

Nationality:

Agency:

Training: 20__Dr LEE Jong-wook Fellowship_____Training Program

Training period: 20 . . ~ 20 . .

1. I was informed of the Guideline for Dr LEE Jong-wook Fellowship from the KOFIH and am fully aware of the Guideline, thus I pledge that I will faithfully comply with the Guideline. And I pledge that I will take responsibility and disadvantage for any matters arising from my non-compliance with the Guideline.
2. I acknowledge that medical and clinical practice may be limited during the Fellowship in Korea without the approval of the Minister of Health and Welfare under Article 27 of the Medical Services Act (prohibition of unlicensed medical practice) and Article 18 of the Enforcement Rule of the Medical Services Act (medical practice of foreign license holder) of the Republic of Korea, which do not allow medical practice for foreign doctors. I agree that the training content and method of the training institution for the Fellows may follow the above laws.
3. I agree that the KOFIH shares my Pledge Statement to which this guideline is attached with my training institution, and the agency I belong to, Ministry of Health, government agency I belong to and the agency I was recommended from in my country.

20____. __. __

(Fellow's signature)

[Annex 2]

Confirmation of Temporary Departure Approval and Pledge Statement on Returning to Fellowship

Chair of Dr LEE Jong-wook Fellowship Steering Committee of 000 (Name of training institution)

Fellow's Name:

Nationality:

Agency:

Name of training institution:

Name of teaching professor:

Training: 20__ Dr LEE Jong-wook Fellowship_____Training program

Training period: 20 . . ~ 20 . .

Departure period: 20 . . ~ 20 . .

Reason for departure:

1. I obtained prior approval from the teaching professor for the above departure.
2. I pledge that I will return to the Fellowship immediately after the above departure period ends.
3. I pledge that I will immediately inform the teaching professor and Dr LEE Jong-wook Fellowship Steering Committee of the circumstances during the above departure period which may affect my returning to the Fellowship.

20__ . __ . __

(Teaching professor's signature) _____

(Fellow's signature) _____

2. OTHERS

- KOFIH Training program requires full commitment to and concentrated effort for study, participants not permitted to accompany any family members.
- Fellows are required not to extend the length of their training program or stay for personal convenience; neither KOFIH nor the training institute will provide any assistance and be responsible for extension of their stay.
- KOFIH assumes any responsibility only within the limit and scope of the insurance for participants.
- KOFIH will not assume any responsibility for illness, injury, or death of the participants arising from extracurricular activities, willful misconduct, or undisclosed pre-existing medical conditions.
- If the participants break any of the rules of KOFIH and the training institute during their stay in Korea, their status as a KOFIH program participant may be suspended.

PART VII. CONTACT INFORMATION

Category	Person in Charge	E-mail Address	Telephone
Team Director	PARK, Bo kyung	bkpark@kofih.org	+82-2-3396-9810
Training Course for Clinical Experts	LEE, Hyang Manager	hlee@kofih.org	+82-2-3396-9817
Training Course for Health Administrator	HAN, Su Jin Assistant Manager	sjhan@kofih.org	+82-2-3396-9819
Training Course for Disease Specialist(TB)	LEE, Eun Young Assistant Manager	eylee@kofih.org	+82-2-3396-9811
Training Course for High-level Officials	KIM, Kang Hee, Assistant Manager	anthro0316@kofih.org	+82-2-3396-9813
Address	7F JEI Corporation Bldg., 6, Eulji-ro, Jung-gu, Seoul, Rpebulic of Korea (zipcode: 04533)		

Korea Foundation for International Healthcare(KOFIH) 2019 Dr LEE Jong-wook Fellowship Program

Application Form

- 1. Clinical Experts & Disease Research Specialist Course**
- 2. Health Administrators Course**
- 3. High-level Officials Course**

December 2018



Application Forms for
2019 Dr LEE Jong-wook Fellowship Program

**1. Clinical Experts &
Disease Research Specialist Course**

Form 1 : List of Applicant (for Ministry of Health)

Form 2 : Recommendation (for Ministry of Health)

Form 3 : Application (for applicants)

Form 4 : Study Plan (for applicants)

<Form 1> List of Applicant

*Application form must be **TYPED in English**, please do not write in hand-writing for legibility.

List of Applicant

#	Name			Affiliation	Position	Date of Birth (YYYY/MM/DD)	Specialty	Email	Tel. (Mobile)
	*Should be identical with Name on Passport								
	Last	Middle	Given						
1									
2									
3									
4									
5									
6									
7									

* Add additional lines if necessary.

***Application Timeline**

#	Process	Deadline	Note
1	Application Submission	Feb 28 2019	*Submission to your MoH
2	Application Review	Within 2 weeks from #1	
3	Interview	Within 2 weeks from #2	
4	Decision Notification	Within 1 weeks from #3	
5	VISA Issuance	2 months taken	
6	Start of Training	2nd week of June	

- * Please note that the dates are subject to change.
- * Admissions decision will be notified to your individual e-mail.
- * Deadline for Application: All required documents must arrive at the KOFIH headquarter in Seoul, Korea.
- * Local deadlines may differ in each country so please make sure to confirm with the KOFIH staff in charge.

<Form 2> Recommendation Form *must be **TYPED** in English

Applicant Information			
1. Name	(last)	(middle)	(given)
2. Position / Title			
3. Affiliation			

Questions for Recommender
4. How long have you known the applicant and in what capability?
5. What do you consider the strength of the applicant?
6. What do you consider the weakness of the applicant?
7. Do you know any physical or mental condition which might affect the applicant's performance during invitational training in Korea? If yes, please explain.

8. Please rate ability / attitude of the applicant in below table. (v)					
	Very Good	Good	Fair	Poor	Very Poor
Servant Leadership					
Passion for Work and Professional Attitudes					
Ability and attitudes to take actions for better health					
Sense of accountability, responsibility, and commitment					
Ability to make visions for better future					
Attitude of perseverance and diligence					
Abilities and talents to become a qualified educator and trainer					
Abilities and talents to become a qualified policy maker and conduct administrative work well					
Level of Oral English					
Level of Written English					
9. Please comment on the ratings that you have assigned in #8 and make any additional statement about applicants potential or personal qualities which you believe would be helpful in considering the person's application for the proposed program.					

Recommender Information			
1. Name	(last)	(middle)	(given)
2. Position or Title			
3. Affiliation			
4. Address			
5. Tel		6. Fax	
7. Email			
(Date) 20 . . .		(Signature)	

<Form 3> Application Form *must be **TYPED** in English

Applicant Information				
Picture *Taken within last 6 months	1. Name	(last)	(middle)	(given)
	2. Gender	F / M	3. Passport Number	*Valid
	4. Affiliation			
	5. Department			
	6. Position/Title			
	7. Specialty Field			
	8. Business Address			
	9. Date of Birth	YYYY/MM/DD	10. Religion	
11. Home Address				
12. Phone(Home)			13. Phone(Work)	
14. Email			15. Mobile	
16. SNS (FB, Instagram etc.)				
17. Emergency Contact	Name	(last)	(middle)	(given)
	Relation to applicant			
	Address			
	Mobile			

Credentials (List up to 3 in preferred order)	
Highest Degree	1.
	2.
	3.
License (No.)	1.
	2.
	3.
Certification (No.)	1.
	2.
	3.

Language Proficiency			
Language	Speaking	Writing	Reading
English	Excellent/Good/Fair/Poor	Excellent/Good/Fair/Poor	Excellent/Good/Fair/Poor
Korean	Excellent/Good/Fair/Poor	Excellent/Good/Fair/Poor	Excellent/Good/Fair/Poor

Language Certificate				
Language	Test	Score	Valid Date	Note
English	TOEFL			<input type="checkbox"/> IBT <input type="checkbox"/> CBT <input type="checkbox"/> PBT
Korean	TOPIK			
Others				

Academic Profile				
Degree	Name of Institution	From	To	Department / Field of Study
BA		YYYY/MM	YYYY/MM	
Master		YYYY/MM	YYYY/MM	
PhD		YYYY/MM	YYYY/MM	
		YYYY/MM	YYYY/MM	

Former Training Experience in Korea or Other Countries					
Year (From ~ to)	Length of Stay	Institution	Country	Funded by	Purpose of Visit

Professional Career			
Name of Organization	Year (From ~ to)	Position	Responsibility

List of Major Publication and Research Activities	
1	
2	
3	
4	
5	

Major clinical practices you have performed in your specialty field
 e.g. number of delivery, C/S operation, hysterectomy and laparoscope operation, management of myomectomy etc. in case of OBGY

Protocols and/or practice for treatment of major diseases that are used by your employed hospital
 (the information will help instructors understand current trends of the medical treatment in your country)

Copy of name card
(name, position/title, institute needs to be listed)

[Empty space for pasting a name card copy]

<Form 4> Study Plan *must be **TYPED in English**

Name	(last)	(middle)	(given)
Specialty/Field			

The following information provided by you will enable your instructors to design the customized curriculum for your training in Korea. It is of the utmost importance for your instructors to fully understand your study goal and objectives so that maximum relevance, efficiency and effectiveness of your clinical training can be ensured.

State precisely the knowledge and skills you want to acquire during your training.

Study Goal

- 1.
- 2.
- 3.
- 4.
- 5.

Based on your study goals as stated above, complete the following statement.

On completion of my training, I hope to be able to :

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.

List up all new knowledge relevant to your specialization you want to learn in detail

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.

List up all new skills relevant to your specialization you want to learn in detail

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.

Application Forms for
2019 Dr LEE Jong-wook Fellowship Program

2. Health Administrators Course

Form 1 : List of Applicant (for Ministry of Health)

Form 2 : Recommendation (for Ministry of Health)

Form 3 : Application (for applicants)

Form 4 : Study Plan (for applicants)

<Form 1> List of Applicant

*Application form must be **TYPED in English**, please do not write in hand-writing for legibility.

List of Applicant

#	Name		Affiliation	Position	Date of Birth (YYYY/MM/DD)	Specialty	Email	Tel. (Mobile)
	*Should be identical with Name on Passport							
	Last	Given						
1								
2								
3								
4								
5								
6								
7								

* Add additional lines if necessary.

Application Timeline

#	Process	Deadline	Note
1	Application Submission	Feb 28 2019	*Submission to your MoH
2	Application Review	Within 2 weeks from #1	
3	Interview	Within 2 weeks from #2	
4	Decision Notification	Within 1 weeks from #3	
5	VISA Issuance	2 months taken	
6	Start of Training	2nd week of June	

- * Please note that the dates are subject to change.
- * Admissions decision will be notified to your individual e-mail.
- * Deadline for Application: All required documents must arrive at the KOFIH headquarter in Seoul, Korea.
- * Local deadlines may differ in each country so please make sure to confirm with the KOFIH staff in charge.

<Form 2> Recommendation Form *must be **TYPED** in English

Applicant Information			
1. Name	(last)	(middle)	(given)
2. Position / Title			
3. Affiliation			

Questions for Recommender	
4. How long have you known the applicant and in what capability?	
5. What do you consider the strength of the applicant?	
6. What do you consider the weakness of the applicant?	
7. Do you know any physical or mental condition which might affect the applicant's performance during invitational training in Korea? If yes, please explain.	

8. Please rate ability / attitude of the applicant in below table. (v)					
	Very Good	Good	Fair	Poor	Very Poor
Servant Leadership					
Passion for Work and Professional Attitudes					
Ability and attitudes to take actions for better health					
Sense of accountability, responsibility, and commitment					
Ability to make visions for better future					
Attitude of perseverance and diligence					
Abilities and talents to become a qualified educator and trainer					
Abilities and talents to become a qualified policy maker and conduct administrative work well					
Level of Oral English					
Level of Written English					
9. Please comment on the ratings that you have assigned in #8 and make any additional statement about applicants potential or personal qualities which you believe would be helpful in considering the person's application for the proposed program.					

Recommender Information			
1. Name	(last)	(middle)	(given)
2. Position or Title			
3. Affiliation			
4. Address			
5. Tel		6. Fax	
7. Email			
<p>(Date) 20 . . . (Signature)</p>			

<Form 3> Application Form *must be **TYPED** in English

Applicant Information				
Picture *Taken within last 6 months	1. Name	(last)	(middle)	(given)
	2. Gender	F / M	3. Passport Number	*Valid
	4. Affiliation			
	5. Department			
	6. Position/Title			
	7. Specialty Field			
	8. Business Address			
9. Date of Birth	YYYY/MM/DD	10. Religion		
11. Home Address				
12. Phone(Home)			13. Phone(Work)	
14. Email			15. Mobile	
16. SNS (FB, Instagram etc.)				
17. Emergency Contact	Name	(last)	(middle)	(given)
	Relation to applicant			
	Address			
	Mobile			

Credentials (List up to 3 in preferred order)	
Highest Degree	1.
	2.
	3.
License (No.)	1.
	2.
	3.
Certification (No.)	1.
	2.
	3.

Language Proficiency			
Language	Speaking	Writing	Reading
English	Excellent/Good/Fair/Poor	Excellent/Good/Fair/Poor	Excellent/Good/Fair/Poor
Korean	Excellent/Good/Fair/Poor	Excellent/Good/Fair/Poor	Excellent/Good/Fair/Poor

Language Certificate				
Language	Test	Score	Valid Date	Note
English	TOEFL			<input type="checkbox"/> IBT <input type="checkbox"/> CBT <input type="checkbox"/> PBT
Korean	TOPIK			
Others				

Academic Profile				
Degree	Name of Institution	From	To	Department / Field of Study
BA		YYYY/MM	YYYY/MM	
Master		YYYY/MM	YYYY/MM	
PhD		YYYY/MM	YYYY/MM	
		YYYY/MM	YYYY/MM	

Former Training Experience in Korea or Other Countries					
Year (From ~ to)	Length of Stay	Institution	Country	Funded by	Purpose of Visit

Professional Career			
Name of Organization	Year (From ~ to)	Position	Responsibility

List of Major Publication and Research Activities	
1	
2	
3	
4	
5	

Major policy makings that you have designed or performed in your specialty field
(etc. policy introduction case, case of providing healthcare with quality of service, please be specific)

Protocols or manuals for management of major diseases that are used by your employed hospital or government
(the information will help instructors understand current trends of the medical treatment in your country)

Copy of name card

(name, position/title, institute needs to be listed)

Empty box for pasting a name card.

<Form 4> Study Plan *must be **TYPED** in English

Name	(last)	(middle)	(given)
Specialty/Field			

The following information provided by you will enable your instructors to design the customized curriculum for your training in Korea. It is of the utmost importance for your instructors to fully understand your study goal and objectives so that maximum relevance, efficiency and effectiveness of your clinical training can be ensured.

State precisely the knowledge and skills you want to acquire during your training.

Study Goal

- 1.
- 2.
- 3.
- 4.
- 5.

Based on your study goals as stated above, complete the following statement.

On completion of my training, I hope to be able to :

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.

List up all new knowledge relevant to your specialization you want to learn in detail

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.

List up all new skills relevant to your specialization you want to learn in detail

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.

Application Forms for
2019 Dr LEE Jong-wook Fellowship Program

3. High-level Officials Course

Form 1 : List of Applicant (for Ministry of Health)

Form 2 : Recommendation (for Ministry of Health)
***OPTIONAL**

Form 3 : Application (for applicants)

<Form 1> List of Applicant

*Application form must be **TYPED in English**, please do not write in hand-writing for legibility.

List of Applicant

#	*Should be identical with Name on Passport		Affiliation	Position	Date of Birth (YYYY/MM/DD)	Specialty	Email	Tel. (Mobile)
	Last	Given						
1								
2								
3								
4								
5								
6								
7								

* Add additional lines if necessary.

※ Application Timeline

#	Process	Deadline	Note
1	Application Submission	Feb 28 2019	*Submission to your MoH
2	Application Review	Within 2 weeks from #1	
3	Decision Notification	Within 1 weeks from #3	
4	VISA Issuance	2 months taken	
5	Start of Training	2nd week of June	

- * Please note that the dates are subject to change.
- * Admissions decision will be notified to your individual e-mail.
- * Deadline for Application: All required documents must arrive at the KOFIH headquarter in Seoul, Korea.
- * Local deadlines may differ in each country so please make sure to confirm with the KOFIH staff in charge.

<Form 2> Recommendation Form *OPTIONAL *must be TYPED in English

Applicant Information			
1. Name	(last)	(middle)	(given)
2. Position / Title			
3. Affiliation			

Questions for Recommender	
4. How long have you known the applicant and in what capability?	
5. What do you consider the strength of the applicant?	
6. What do you consider the weakness of the applicant?	
7. Do you know any physical or mental condition which might affect the applicant's performance during invitational training in Korea? If yes, please explain.	

8. Please rate ability / attitude of the applicant in below table. (v)					
	Very Good	Good	Fair	Poor	Very Poor
Servant Leadership					
Passion for Work and Professional Attitudes					
Ability and attitudes to take actions for better health					
Sense of accountability, responsibility, and commitment					
Ability to make visions for better future					
Attitude of perseverance and diligence					
Abilities and talents to become a qualified educator and trainer					
Abilities and talents to become a qualified policy maker and conduct administrative work well					
Level of Oral English					
Level of Written English					
9. Please comment on the ratings that you have assigned in #8 and make any additional statement about applicants potential or personal qualities which you believe would be helpful in considering the person's application for the proposed program.					

Recommender Information			
1. Name	(last)	(middle)	(given)
2. Position or Title			
3. Affiliation			
4. Address			
5. Tel		6. Fax	
7. Email			
(Date) 20 . . .		(Signature)	

<Form 3> Application Form *must be **TYPED** in English

Applicant Information				
Picture *Taken within last 6 months	1. Name	(last)	(middle)	(given)
	2. Gender	F / M	3. Passport Number	*Valid
	4. Affiliation			
	5. Department			
	6. Position/Title			
	7. Specialty Field			
	8. Business Address			
9. Date of Birth	YYYY/MM/DD		10. Religion	
11. Home Address				
12. Phone(Home)		13. Phone(Work)		
14. Email		15. Mobile		
16. SNS (FB, Instagram etc.)				
17. Emergency Contact	Name	(last)	(middle)	(given)
	Relation to applicant			
	Address			
	Mobile			

Credentials (List up to 3 in preferred order)	
Highest Degree	1.
	2.
	3.
License (No.)	1.
	2.
	3.
Certification (No.)	1.
	2.
	3.

Language Proficiency			
Language	Speaking	Writing	Reading
English	Excellent/Good/Fair/Poor	Excellent/Good/Fair/Poor	Excellent/Good/Fair/Poor
Korean	Excellent/Good/Fair/Poor	Excellent/Good/Fair/Poor	Excellent/Good/Fair/Poor

Language Certificate				
Language	Test	Score	Valid Date	Note
English	TOEFL			<input type="checkbox"/> IBT <input type="checkbox"/> CBT <input type="checkbox"/> PBT
Korean	TOPIK			
Others				

Academic Profile				
Degree	Name of Institution	From	To	Department / Field of Study
BA		YYYY/MM	YYYY/MM	
Master		YYYY/MM	YYYY/MM	
PhD		YYYY/MM	YYYY/MM	
		YYYY/MM	YYYY/MM	

Former Training Experience in Korea or Other Countries					
Year (From ~ to)	Length of Stay	Institution	Country	Funded by	Purpose of Visit

Professional Career			
Name of Organization	Year (From ~ to)	Position	Responsibility

List of Major Publication and Research Activities	
1	
2	
3	
4	
5	

Major policy makings that you have designed or performed in your specialty field
 (etc. policy introduction case, case of providing healthcare with quality of service, please be specific)

Protocols or manuals for management of major diseases that are used by your employed hospital or government
 (the information will help instructors understand current trends of the medical treatment in your country)

Copy of name card

(name, position/title, institute needs to be listed)

Korea Foundation for International Healthcare(KOFIH)
2019 Dr LEE Jong-wook Fellowship Program
Consent to Collect and Use Personal Information

- 1. For Applicant**
- 2. For Recommender**

December 2018



1-1. Consent to Collect and Use Personal Information

◆ Consent to collect and use personal information (mandatory)

Purposes of Collecting/Using Personal Information	To confirm personal information and evidential documents necessary for Dr LEE Jong-wook Fellowship Program
Personal Information to be Collected	- Application form: photo, name, gender, affiliation, home address, office address, position, date of birth, mobile number, telephone number (home), office number, e-mail, emergency contact (name, relation, e-mail, mobile number) - Other documents: academic credentials, copy of professional license (if applicable), copy of certificate, copy of passport, career certificate (if application), letter of recommendation, score report/certificate of foreign language test (if applicable)
Period of Retention and Use	<u>Until Dr LEE Jong-wook Fellowship Program training is completed</u>
Right to Refuse Consent	You have right to reject consent to collecting and using personal information stated in this consent form. If you refuse to give consent, it may cause disadvantage for you due to unconfirmed materials for Dr LEE Jong-wook Fellowship Program.
I have read and understood the above consent form and agree to collect and use the personal information. Agree <input type="checkbox"/> Disagree <input type="checkbox"/>	

◆ Consent to collect and use personal information (optional)

Purposes of Collecting/Using Personal Information	To confirm personal information and evidential documents necessary for Dr LEE Jong-wook Fellowship Program
Personal Information to be Collected	Social networking service
Period of Retention and Use	<u>Until Dr LEE Jong-wook Fellowship Program training is completed</u>
Right to Refuse Consent	You have right to reject consent to collecting and using personal information stated in this consent form. Even if you refuse to give consent, it does not affect the process of selecting trainees for the Program. However, it may limit the services provided from the training program.
I have read and understood the above consent form and agree to collect and use the personal information. Agree <input type="checkbox"/> Disagree <input type="checkbox"/>	

Pursuant to the Article 7 of the Korea Foundation for International Healthcare Act and the Article 15 of the Personal Information Protection Act,
 I have read and understood the above consent form and hereby agree to collect and use the personal information.

201 . . .

(Name)

(Signature)

1-2. Consent to Collect and Use Personal Information

◆ Consent to collect and use personally identifiable information

Purposes of Collecting/Using Personal Information	To confirm personal information and evidential documents necessary for Dr LEE Jong-wook Fellowship Program
Personally Identifiable Information to be Collected	<u>Passport number</u>
Period of Retention and Use	<u>Until Dr LEE Jong-wook Fellowship Program training is completed</u>
Right to Refuse Consent	You have right to reject consent to collecting and using personal information stated in this consent form. If you refuse to give consent, it may cause disadvantage for you due to unconfirmed materials for Dr LEE Jong-wook Fellowship Program.

I have read and understood the above consent form and agree to collect and use the personally identifiable information.

Agree Disagree

◆ Consent to collect and use sensitive information

Purposes of Collecting/Using Personal Information	To confirm personal information and evidential documents necessary for Dr LEE Jong-wook Fellowship Program
Sensitive Information to be Collected	<u>Medical records, religion</u>
Period of Retention and Use	<u>Until Dr LEE Jong-wook Fellowship Program training is completed</u>
Right to Refuse Consent	You have right to reject consent to collecting and using personal information stated in this consent form. If you refuse to give consent, it may cause disadvantage for you due to unconfirmed materials for Dr LEE Jong-wook Fellowship Program.

I have read and understood the above consent form and agree to collect and use the sensitive information.

Agree Disagree

Pursuant to the Article 7 of the Korea Foundation for International Healthcare Act and the Article 15 of the Personal Information Protection Act, I have read and understood the above consent form and hereby agree to collect and use the personal information.

201 . . .

(Name)

(Signature)

1-3. Consent to Collect and Use Personal Information

◆ Consent to collect and use personal information

Purposes of Collecting/Using Personal Information	To preserve ground for selection of trainees of Dr LEE Jong-wook Fellowship Program; contact to promote Dr LEE Jong-wook Fellowship Program and encourage participation (e.g., Dr LEE Jong-wook Fellowship Alumni, etc.); check training history of trainees and provide relevant training; and keep statistics on invitational healthcare training
Personal Information to be Collected	Name, gender, nationality, photo, affiliated institute, affiliated department, position/title, date of birth, home address, telephone number (home), mobile number, e-mail, academic background (school name, period, major and academic degree), previous international program/study experience (duration of stay), experience (institute name, employment period, title/major responsibility), name of recommender
Period of Retention and Use	<u>From consent to personal information collection to request for its destruction</u>
Right to Refuse Consent	You have right to reject consent to collecting and using personal information stated in this consent form. If you refuse to give consent, you cannot use various services such as Dr LEE Jong-wook Fellowship Alumni, KOFIH project news, and application to training programs.

I have read and understood the above consent form and agree to collect and use the personal information.

Agree Disagree

◆ Consent to collect and use personally identifiable information

Purposes of Collecting/Using Personal Information	To check training history of trainees; provide relevant training; and keep statistics on invitational healthcare training
Personally Identifiable Information to be Collected	<u>Passport number</u>
Period of Retention and Use	<u>From consent to personal information collection to request for its destruction</u>
Right to Refuse Consent	You have right to reject consent to collecting and using personal information stated in this consent form. If you refuse to give consent, it may limit provision of our services such as your application to training programs.

I have read and understood the above consent form and agree to collect and use the personally identifiable information.

Agree Disagree

1-3. Consent to Collect and Use Personal Information

◆ Consent to collect and use sensitive information

Purposes of Collecting/Using Personal Information	To check training history of trainees; provide relevant training; and keep statistics on invitational healthcare training
Sensitive Information to be Collected	<u>Religion</u>
Period of Retention and Use	<u>From consent to personal information collection to request for its destruction</u>
Right to Refuse Consent	You have right to reject consent to collecting and using personal information stated in this consent form. If you refuse to give consent, it may limit provision of our services such as your application to training programs.

I have read and understood the above consent form and agree to collect and use the sensitive information.

Agree Disagree

Pursuant to the Article 7 of the Korea Foundation for International Healthcare Act and the Article 15 of the Personal Information Protection Act, I have read and understood the above consent form and hereby agree to collect and use the personal information.

201 . . .

(Name)

(Signature)

1-4. Consent to Release Personal Information to a Third Party

◆ Consent to release personal information to a third party

<p>Personal Information Recipients</p>	<p><u>Korea Foundation for International Healthcare, National Health Insurance Service, Health Insurance Review and Assessment Service, Korea Human Resource Development Institute for Health & Welfare, Korea Health Industry Development Institute</u></p>
<p>Purposes of Releasing Personal Information</p>	<p><u>To check training history of trainees, provide relevant training, and keep statistics on invitational healthcare training</u></p>
<p>Personal Information to be Released</p>	<p>Name, Gender, Nationality, Photo, Affiliated institute, Affiliated department, Position/Title, Date of birth, Home address, Telephone number (home), Mobile number, E-mail, Academic background (school name, period, major and academic degree), Previous international program/study experience (duration of stay), Experience (institute name, employment period, title/major responsibility), Name of recommender</p>
<p>Period of Retention and Use</p>	<p><u>From consent to personal information collection to request for its destruction</u></p>
<p>Right to Disagree with Consent</p>	<p>You have right to disagree with releasing personal information to a third party. If you choose not to provide the information, you may be unable to use some of our services such as application to training programs.</p>

I have read and understood the above consent form and agree to disclose the personal information stated above to the third parties.

Agree Disagree

1-4. Consent to Release Personal Information to a Third Party

◆ Consent to release sensitive information to a third party

<p>Personal Information Recipients</p>	<p><u>Korea Foundation for International Healthcare, National Health Insurance Service, Health Insurance Review and Assessment Service, Korea Human Resource Development Institute for Health & Welfare, Korea Health Industry Development Institute</u></p>
<p>Purposes of Releasing Personal Information</p>	<p><u>To check training history of trainees, provide relevant training, and keep statistics on invitational healthcare training</u></p>
<p>Personal Information to be Released</p>	<p><u>Religion</u></p>
<p>Period of Retention and Use</p>	<p><u>From consent to personal information collection to request for its destruction</u></p>
<p>Right to Disagree with Consent</p>	<p>You have right to disagree with releasing personal information to a third party. If you choose not to provide the information, you may be unable to use some of our services such as application to training programs.</p>

I have read and understood the above consent form and agree to disclose the personal information stated above to the third parties.

Agree Disagree

1-4. Consent to Release Personal Information to a Third Party

◆ Consent to release personally identifiable information to a third party

Personal Information Recipients	<u>Korea Foundation for International Healthcare, National Health Insurance Service, Health Insurance Review and Assessment Service, Korea Human Resource Development Institute for Health & Welfare, Korea Health Industry Development Institute</u>
Purposes of Releasing Personal Information	<u>To check training history of trainees, provide relevant training, and keep statistics on invitational healthcare training</u>
Personal Information to be Released	<u>Passport number</u>
Period of Retention and Use	<u>From consent to personal information collection to request for its destruction</u>
Right to Disagree with Consent	You have right to disagree with releasing personal information to a third party. If you choose not to provide the information, you may be unable to use some of our services such as application to training programs.

I have read and understood the above consent form and agree to disclose the personal information stated above to the third parties.

Agree Disagree

Pursuant to the Article 17 of the Personal Information Protection Act, I have read and understood the above consent form and hereby agree to provide personal information.

201 . . .

(Name)

(Signature)

2. Consent to Collect and Use Personal Information (For RECOMMENDER)

(recommender's handwritten signature is required)

◆ Consent to collect and use personal information

Purposes of Collecting/Using Personal Information	To confirm personal information and evidential documents necessary for Dr LEE Jong-wook Fellowship Program
Personal Information to be Collected	Name, affiliation/title, address, contact number/fax number, e-mail
Period of Retention and Use	<u>Until Dr LEE Jong-wook Fellowship Program training is completed</u>
Right to Refuse Consent	You have right to reject consent to collecting and using personal information stated in this consent form. If you refuse to give consent, it may cause disadvantage for you due to unconfirmed materials for Dr LEE Jong-wook Fellowship Program.

I have read and understood the above consent form and agree to collect and use the personal information.

Agree Disagree

Pursuant to the Article 7 of the Korea Foundation for International Healthcare Act and the Article 15 of the Personal Information Protection Act, I have read and understood the above consent form and hereby agree to collect and use the personal information.

201 . . .

(Name)

(Signature)