

【Attachment 2-1】

(Work Experiences, Vocational Training Experiences, National Qualifications)

## Application for Job Capacity Assessment

<b>Skills Test application no. (filled in by sending agency)</b>			
<p>I pledge that I will take full civil and criminal liability if any information in the submitted documents required for the Job Capacity Assessment Certificate of Work Experiences, national qualification certificates, etc.) is proven to be false or factually inaccurate.</p> <p><b>* Forgery and falsification will result in the nullification of the test results and disqualification for application to EPS-TOPIK for the following four years.</b></p>			
<b>Filled in by applicant</b>		* Color the circle in the correct box(●)	
<b>EPS-TOPIK application no.</b>			
<b>Manuf acturing</b>	Assem bly <input type="radio"/> Joining <input type="radio"/> Measure ment <input type="radio"/>	<b>Fishery</b>	Seafarming <input type="radio"/> In and off-shore fishery <input type="radio"/>
<b>Constr uction</b>	Carpen try <input type="radio"/> Rebar <input type="radio"/>	<b>Agriculture and livestock</b>	Cultivat ion <input type="radio"/> Livestock <input type="radio"/>
<b>Shipbu ilding</b>	Scaffold <input type="radio"/> Insulati on <input type="radio"/> Grinder <input type="radio"/>	Welding + Fit-up <input type="radio"/>	Piping-Machi nery/Joinery + Electric Cabling <input type="radio"/> Shipbuildi ng-related manufact uring <input type="radio"/>
<b>Service1</b>	<input type="radio"/>	<b>Service2</b>	<input type="radio"/>
<b>Date of birth</b>	. . .	<b>Telephone no.</b>	
<b>Date</b>	20 . .	<b>Name and signature</b>	<b>(signature)</b>
<b>Marked by applicant</b>		*Mark in the correct box.	<b>Marked by sending agency</b>
<input type="checkbox"/> <b>Work Experiences (if applicable)</b>			
1 year or longer <input type="radio"/>	Less than 1 year <input type="radio"/>	True <input type="radio"/>	False <input type="radio"/>
<input type="checkbox"/> <b>Training/Academic Background (if applicable)</b>			
<b>Training</b>		<b>Academic background</b> <small>(for manufacturing, fishery(special cases) only)</small>	
120 hours or longer <input type="radio"/>	Less than 120 hours <input type="radio"/>	Equivalent of Junior college diploma <input type="radio"/>	High school diploma or lower <input type="radio"/>
<input type="checkbox"/> <b>Qualifications (up to 2 qualifications if applicable)</b>			
No.	Qualification	Year of issuance	Issued by
1			
2			
<b>Confirmed by sending agency</b>		<b>Name and signature:</b>	<b>(signature)</b>

«This form is to be filled in and submitted by the applicant able to have the employer (or job placement agency on behalf of an overseas employer) issue evidence of work experiences.»

## Certificate of Work Experiences

EPS-TOPIK application no.:

Personal information	Nationality		ID no.	
	Name		Contact information	
	Address		Telephone	
			Mobile	
		Email		

Work experiences	Period of service (MM DD, YY-MM DD, YY)	Position	<b>Assigned jobs*</b> (as specific as possible)
	<b>Total</b>	<b>Total period of service: ____ months</b>	

I hereby confirm that the above information, required to verify my work experiences in relevant fields for application to EPS-TOPIK, etc., pursuant to the Korea-Sending Country MOU, is accurate. I am aware that I will be subject to **criminal liability for forgery and falsification of official and private documents, etc.** if any of the information is proven to be false or factually inaccurate.

Date:

Applicant:           **(signature)**

I hereby confirm that the above information is accurate.

Date:

Company:           Telephone number:

Address:

Representative: (official seal or signature)

Issuer*	
Unit	
Position	
Tel.	
Name	signature

**To Chair of HRDK**

**\* Note: If any required information (\*) is omitted [the representative's signature (or official seal), the issuer's name/contact information, etc.], the submission will not be recognized as evidence and thus the work experiences entered will be considered invalid.**

**\* Complete one certificate for each company (four certificates to be submitted if the applicant has worked for four companies).**

**\* This document may be replaced with the Certificate of Work Experiences printed out from the Employment Permit System website in English.**

«This form is to be submitted with the signatures of two sureties (other than relatives by blood or marriage) by the applicant unable to have evidence of work experiences issued due to the shutdown/bankruptcy of the employer (or job placement agency) or due to the employer’s status (micro-business scale, lack of business registration, etc.).»

## Confirmation of Factual Grounds of Work Experiences (standard form)

EPS-TOPIK application no.:

<b>Name</b>		<b>Date of birth</b>	
<b>ID number</b>		<b>Telephone number</b>	

Company	Position	Period of service (MM DD, YY-MM DD, YY)	Assigned jobs	Note
<b>Total</b>		<b>Total period of service: _____ months</b>		

I hereby confirm that the above information, required for application to EPS-TOPIK, etc., pursuant to the Korea-Sending Country MOU, is accurate. I am aware that I will be subject to **criminal punishment for forgery and falsification of official and private documents, etc.** if any of the information is proven to be false or factually inaccurate.

<b>Surety 1</b>	
Name: (signature)	Date of birth:
Address:	
Company: Position:	Telephone number: (mobile: )
Relationship with the applicant:	
<b>Surety 2</b>	
Name: (signature)	Date of birth:
Address:	
Company: Position:	Telephone number: (mobile: )
Relationship with the applicant:	

Attachment: **One copy of each surety’s ID**

**\*Notes**

- 1) If any required information is omitted (the surety’s name, telephone number, etc.), the submission will not be recognized as evidence and thus the work experiences entered will be considered invalid.
- 2) The Confirmation of Factual Grounds of Work Experiences, required in the case of the job placement agency’s bankruptcy or shutdown, must be attached with the employment contract or the employment visa/immigration records (for overseas employment) to be recognized as evidence.