**Internship Application Form**

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|  **INFORMATION** |
| Given/First Name: | Surname/Last Name:  |
| Gender: [ ]  Male [ ]  Female | Date of Birth: |
| Nationality: |
| Visa Status in Korea (if non-Korean): |
| Address: |
| E-mail:Cell Phone: |

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| **EMERGENCY CONTACT INFORMATION** |
| Name: | Relationship: |
| Phone: | E-Mail: |

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| **LANGUAGE ABILITIES** |
| Mother Tongue:  |
| Other Language(s): |
| **English Proficiency** |
| **Listening** | [ ]  Excellent [ ]  Fair(native level)  | **Speaking** | [ ]  Excellent [ ]  Fair(native level)  |
| **Writing** | [ ]  Excellent [ ]  Fair(native level)  | **Reading** | [ ]  Excellent [ ]  Fair(native level) |
| **Other Language Proficiency: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| **Listening** | [ ]  Excellent [ ]  Fair [ ]  Poor | **Speaking** | [ ]  Excellent [ ]  Fair [ ]  Poor |
| **Writing** | [ ]  Excellent [ ]  Fair [ ]  Poor | **Reading** | [ ]  Excellent [ ]  Fair [ ]  Poor |
| **Other Language Proficiency: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| **Listening** | [ ]  Excellent [ ]  Fair [ ]  Poor | **Speaking** | [ ]  Excellent [ ]  Fair [ ]  Poor |
| **Writing** | [ ]  Excellent [ ]  Fair [ ]  Poor | **Reading** | [ ]  Excellent [ ]  Fair [ ]  Poor |

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| **EDUCATIONAL BACKGROUND** |
| Institution | Major | Degree/Year Earned | City, Country |
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| **PROFESSIONAL EXPERIENCE** |
| Period | Organization | Position | Responsibilities*(describe briefly, key words and/or bullet point)* |
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| Describe other specific experiences, if applicable. |

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| **MOTIVATION** |
| Please briefly state your reasons for applying for this internship at WeGO. |

**I certify that all personal information stated above is true and complete to the best of my knowledge.**

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|  |  |  |  |  |
| Date (dd/mm/yyyy) |  | Name of Applicant |  | Signature |

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| ATTACHMENTS : | [ ]  Resume (with recent photo)[ ]  Cover Letter [ ]  Portfolio (or just examples of past design work) *(Required for Design & Communications Internship candidates)*[ ]  Certification of English language score (TOEIC, etc.) *(Optional)* |