Begin Your Application

Review and Print Your Application



NOTICES

* Before starting your application, please review our "Initial Application Required Documents Guide" for instructions on how to prepare for your online Some other helpful information can also be found by clicking the "Application Info" link at the bottom of this page.

- * For applicants applying through an official recruitement Agency or partner MOU/MOA Organization, please consult directly with them before starting your ap
- * Keeping the application open and idle for extended periods of the time may result in your session timing out and data being lost.

* Please send any inquires to Epik@korea.kr.



PERSONAL INFORMATION

* NAME	LAST NAME(S) : POTTER FIRST NAME(S) : HARRY M Check this box if you have ever received a legal	Include any suffix (Jr., Sr., etc). MIDDLE NAME(S) : JAMES name change.
* DATE OF BIRTH	YEAR 1987 MONTH 01 DATE 01 (ex: YY) AGE: 32	INPUT
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* MARRIAGE	O Married 💿 Unmarried	CORRESPONDING
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* PRIMARY CITIZENSHIP	United Kingdom	a.
SECONDARY CITIZENSHIP	List any other citizenship(s) you hold.	
* KOREAN HERITAGE	- Are you ethnically Korean? 〇 Yes ④ No ^{U N} 🧟 수험생의 한결 같은 소망 진학어플라이	- Internet E — 🗆 🗙
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APPLICATION INFORMATION

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JOINT APPLICANT OR DEPENDENT(1) > Add	Name	، Joint ع	CORRESPONDING	You		
* PLACEMENT PREFERENCE	Applicants should ultimately be flexible about working anyw ocation below. Final placement in that location cannot be gu Select Your Preferred Placement Location : Flexible Your preferred placement location will be taken into conside a variety of factors including availability, the specific needs Program, etc.	pplicants should ultimately be flexible about working anywhere in Korea. If you have a specific preference for placement, please selection below. Final placement in that location cannot be guaranteed. elect Your Preferred Placement Location : Flexible v our preferred placement location will be taken into consideration; however, final placement will ultimately be decided on variety of factors including availability, the specific needs of the offices of education, and the discretion of the EPIK rogram, etc.				
* START PREFERENCE	The majority of the positions are for the February main intake - My ideal startind date is February Only (Main Intake) -If you do not secure a placement this term, do you want to	The majority of the positions are for the February main intake. Late intake positions start in March and April. My ideal startind date is February Only (Main Intake) If you do not secure a placement this term, do you want to be notified of application for Fall 2020? YES O NO				

ILE UPLOAD

* RECOMMENDATION (1) * RECOMMENDATION (2)	Applicants must submit 2 letters of recommendation. Pleas View Uploaded File Applicants must submit 2 letters of recommendation. Plea View Uploaded File Upload File	MUST UPLOAD 2 LETTERS
Current Contract	Current teachers in Korea must submit a scan of the pag page of the EPIK website for details. > Upload File	OF RECOMMENDATION (ONE FILE PER FIELD)
Proof of English Education	If part or all of your education was conducted in South A within one of the seven designated countries where Engli English education for all schools attended from 7th year/s the EPIK website for details. > Upload File	re sh is not the primary language of instruction for schools, please submit proof of rade and before entrance into univeristy. Please visit the "Apply Now" page of

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AFTER PRESSING 'PROCEED' ALL **APPLICATION SECTIONS** PRODUCE A COMPLETED **VERSION OF THE SEC-**TION.

PLEASE DOUBLE CHECK THE APPLICATION AT THIS TIME.

ADDITIONAL PERSONAL INFORMATION

• Q1.	Nas English the language of instruction from 7th grade through university and were the schools located in one of the seven designated countries we hire from or, if not, were they accredited international schools taught primarily in English? YES ONO						
*Q2.	Have you ever terminated any teaching contract? O YE3	ave you ever terminated any teaching contract? YE3					
* Q3.	Besides standard earlobe piercings, do you have any other pierc O YES NO	cings?					
* Q4.	Do you have any tattoos? (If yes, be specific and indicate size O YES NO						
● Q6.	Have you ever been charged (whether convicted or dismissed (Alcohol and drug-related offenses are included.) O YES						
• Q6.		QUESTIONARRE					
* Q7.		TRUTHFULLY AND					
÷Q8.	Are 2-1 understand that locuments submitted to EPIK will no NO 3-1 will notify EPIK if I decide to withdraw from the progr	CHECK ALL					
SELF MEDICAL ASS	to reapply for 1 year and that I must return all docume 4-1 am prepared to bring the equivalent of 1,000 U3D to : 5-1 understand that the specific school location, type, g PDF/MOE and that this information will not be provide	EPIK POLICIES					
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ui.	(ی	8-I understand that my final placement may ultimately be with any office of education, and I understand that placement is not guaranteed until final acceptance by an office of education following document submission.	V				
02.	01	7-1 understand commuting times may vary and sometimes be upward of 60 minutes.	V				
	Do	6-1 understand that as an EPIK teacher, I am not allowed to have any pets while residing in Korea.	V				
Q3.	Tut O 1	9-1 am aware that if I break orientation rules such as bringing/drinking alcohol inside the dormitories/facilities, being truant from any scheduled activities, violating curfew, or performing conduct unbecoming of an EPIK teacher my contract will be terminated and that I will bear the	V				
Q4.	Are	costs of leaving Korea.					
Q6.	Hav	10- I understand that all successful applicants must take a medical exam in Korea in accordance with the requirements of the EPIK program. If the results show that the applicant is unit to be an EPIK teacher, all costs for entry, stay, and departure will be borne by the EPIK applicant.	V				
Q6.		11- I understand that the orientation is mandatory for all applicants including those who have completed orientation previously. I understand that it is my responsibility to ensure that I plan accordingly so that my schedule does not conflict with my obligation to attend orientation. Failure to attend the orientation may result in the termination of my contract offer.	V				
Q7.		12-1 will immediately inform the EPIK office of any change to my health (surgery, pregnancy, injury, additional prescribed medication, etc.) or of any new tattoos or piercings that are obtained after submission of this application. I understand that this information must be shared with EPIK within 24 hours and that if I had received a placement at that time, it may be grounds for reevaluation by my POE/MOE.	V				
Q8.	Do disi O 1	13-I will keep all tattoos covered and remove all non-standard piercings when in any educational or professional setting. I will ensure that tattoos will not be seen by any student, educator, instructor, supervisor, or other individual associated or affiliated with my educational institution or Office of Education. I will accept any consequences for the failure to do so.	V				
Q9.	Hav	4-1 will not smoke on school grounds or at any school function. Lunderstand that I may be prohibited from smoking inside the school provided housing and will abide by the rules of the housing's landlord. I will refrain from smoking in public areas where there is a reasonable chance that I may be seen by students or co-workers.					
Q10.	Me	16- I understand that if I have any dependents that will accompany me to Korea, I am responsible for all matters concerning those dependents such as visa issuance and that EPIK does not provide any extra assistance or benefits in regards to housing considerations, etc.	V				
Q11.	0	18- I give permission to the National Institute for International Education and all affiliated organizations to use the email contacts provided in this application for the purposes of communication, providing information, conducting surveys, and etc. as needed. I give authorization for photos and video of me to be taken during the orientation period and used in any promotional or educational material.					
012.	1	17-I hereby authorize the English Program in Korea (EPIK) to verify the information disclosed in this application form and the documents required by EPIK as well as to collect any other information deemed necessary by EPIK to determine my suitability as an applicant from In. This includes but is not limited to contacting	V				
F	L	LINFULL NAME	V				
AN	AND CURRENT DATE						

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 J
 POTTER
 2018 / 06 / 12

 FIRST NAME ↑
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🛠 This Essay is **300** Words long

ℜ This Essay is 125 Words long.

* Please explain your teaching philosophy.

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WRITE PERSONAL ESSAYS AS INSTRUCTED. *PLEASE REVIEW AND MAKE CERTAIN THERE ARE NO TYPOS

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* QUESTIONNAIRE

How did you learn about the EPIK Program? Select as many as applicable.

EPIK Homepage	EPIK e-Press	Friend/Family	Facebook Advertisement
University/School	Google Search	TaLK Program	Ourrent/Previous EPIK Teacher(s)

* QUESTIONNAIRE

How did you learn about the EPIK Program? Select as many as applicable.

EPIK Homepage	EPIK e-Press	Friend/Family	Facebook Advertise
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Blogs	Online Forum	Youtube	Other

REVIEW ONCE MORE WHEN COMPLETED APPLI-CATION IS PRODUCED (AFTER 'PROCEED')





Begin Your Application

Review and Print Your Application

LESSON PLAN

*Grade Level	Elementary
Ability Level	Beginner
# of Students	30
*Lesson Topic	Hi

*Previous Olass * Completely fill the space provided below up to the word

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Objective

*By the end of this class students will be able to: * Completely fill the

By the end of this class students will be able to

REVIEW WHEN COMPLETED APPLICA-TION IS PRODUCED (AFTER 'PROCEED')

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Next Class

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Your application has been submitted.

Confirm