



Overseas Koreans Agency (OKA)

2024 Overseas Korean Adoptees Gathering Application Guide

■ Objectives

Overseas Korean Agency (OKA) is slated to host the ‘**2024 Overseas Korean Adoptees Gathering**’ by cordially inviting overseas Korean adoptees to Republic of Korea. The Gathering aims at:

- allowing the participants to have a great chance of **feeling more connected to the motherland** while fully engaging in **a number of hands-on programs**, such as Talk-show’ and ‘Info-session’ on the forthcoming services being provided by the OKA as well as on the ethnic identity as a Korean
- enabling the invited participants to have a window of opportunities to **get experienced a myriad of Korean culture** along with the **better understanding on the Korea**
- offering the participants to establish **productive network** while fully having and active association with other participants from all around the world.

■ Overview

- Duration: **21(Tue.) ~ 24(Fri.) May 2024**
- Location: Seoul
 - ※ Exact venue has yet to be decided.
- Number of Participants: 100 persons (Incl. accompanying people)
 - ※ Each participant can be accompanied by 1 person. (In principle, applicant’s children can attend as companion)
- Programs: Opening events and banquets, Talk-concert, Info-session, Group discussions, Cultural experience & visiting historical sites, etc.



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<Programs Overview>

| Date | Activities |
|------------------------------------|---|
| Day-1 21 May (Tue.) | <ul style="list-style-type: none">✓ Registration & Check-In✓ Orientation & Talk-show✓ Opening ceremony, Keynote speech✓ Welcoming dinner |
| Day 2 22 May (Wed.) | <ul style="list-style-type: none">✓ Cultural Experience. (Tour of Historical Sites, etc.) |
| Day 3 23 May (Thurs.) | <ul style="list-style-type: none">✓ Info Session pertaining to Korean Adoptees' issues✓ Group discussions: To strengthen Korean Network✓ Networking session |
| Day 4 24 May (Fri.) | <ul style="list-style-type: none">✓ Closing ceremony: wrap-up the gathering✓ Farewell luncheon |

■ Application

1. Eligibility: Overseas Korean adoptees over the age of 18

2. Application Procedure

➤ **Application Period**

- Deadline: by **23 Feb., 2024 (Fri.), 18:00(KST)**
- Selection Announcement: On or about 4 March 2024 (Mon.)
(The announcement is subject to change)

➤ **Procedure of the application**

(Each participant must follow the following step 1 & 2 in order.)

<Step 1>

- ✓ Submit all application forms (originals – Incl. handwritten signatures) to the Republic of Korea Missions Overseas (Embassy, Consulate-General, Consulate).
Please be noted that originals submitted will not be returned.



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<Step 2>

- ✓ Submit a copy of all documents (in full) submitted to the to the Republic of Korean Missions Overseas by email. sjkim0303@korea.kr.

Results will be announced to selected participants individually and to Republic of Korea Missions Overseas. Booking a plane ticket (Being undertaken personally by each participant)

4. Selection Procedure

- Reviewing the documents by the Republic of Korea Missions Overseas (End Feb.)
- OKA Deliberative Committee is to determine the selected participants (End Feb.)
- Selection Announcement for participants (Early Mar.)

※ Selection Priority

- ☐ Those who have never visited Korea before
- ☐ Those who have no experience in participating in any programs organized by Overseas Korean Foundation (OKF) incl. other organizations and/or entities
- ☐ Those who have a high priority recommendation form Republic of Korea Missions Overseas
- ☐ Those who have an outstanding participation in Korean Adoptee Networks

Key things to be kept in mind

- ✓ **The original files shall be written in either Korean or English.**
- ✓ **Flight booking is required to be undertaken by each participant**
- ✓ Documents submitted pertinent application process are not expected to be returned.
- ✓ Upon finalizing the selection process, the OKA will get a hold of the selected applicants individually by requesting to send a copy of passport.
- ✓ Please be sure to sate reachable contact details whereby the OKA won't be missing out any information sharing in a timely manner.



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■ Benefits for the participants

| | Support Details | Incl. |
|--------------------------------------|---|------------------------------------|
| Airfare | Round-trip Ticket (Economy Class) <ul style="list-style-type: none"> ✓ OKA will reimburse expense to participants <u>within the upper limit</u> of OKA standards. ✓ OKA will not cover against any excess charges being incurred by be participant's personal purpose ✓ OKA will inform the only selected applicants of the upper limits being covered by the OKA. ✓ Reimbursement will be undertaken within one month after the end of the program at the latest ✓ Copy of tickets and boarding pass are should be turned in to the OKA upon request ✓ In case of stopping over in areas outside of residence for personal reasons, the area nearest to Korea will be considered as a starting point of the departure ✓ Boarding dates <u>up to two weeks before and after the program</u> will be valid for the reimbursement | One Accredited Accompanying Person |
| Accommodation | Any incurred charge pertinent to accommodation. will be covered by the OKA <ul style="list-style-type: none"> ✓ One room per 2 people (Breakfast incl.) ✓ Upon the request of the single room, 50% of expense will be charged to the person who requested | |
| Participation fee & Meals | The OKA will cover the full expenses as per the participation incl. meals only during the official stay for the program (21~24 May 2024) | |

※ (N.B) No other expenses apart from those aforementioned will be reimbursed.

■ Contact information

Overseas Koreans Agency (OKA)

Mr. KIM Sung-jun

Deputy Director, Future Generation Overseas Koreans and Human Rights Division

Phone: +82-(0)32-585-3215

E-mail: sjkim0303@korea.kr



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[Appendix 1]

| Application Form | | | |
|--|---|--------------------|---|
| Name *Name must match passport | (Full Name) Last First Middle _____ (Korean Name) , if applicable _____ | | Photo Recent Color Photo (3x4cm) |
| | Gender <input type="checkbox"/> Male <input type="checkbox"/> Female | | |
| | Classification <input type="checkbox"/> Overseas Korean Adoptee * If you accompany your child, please fill out the 'Form of 'Appendix 2 | | |
| Date of Birth | yy/mm/dd | | |
| Place of Birth | (City/Town) | | (Country) |
| Country of Residence | | Nationality | |
| Passport Info. | (Passport Number) | | (Country of Issue) |
| | (Date of Issue) | | (Date of Expiry) |
| Contact Info. | (Home Phone No.) | | (Cell Phone No.) |
| | (E-mail Address) | | |
| | (Current Mailing Address) | | |
| Emergency Contacts | 1. Primary Contact | | 2. Secondary Contact |
| | (Name) | | (Name) |
| | (Relationship) | | (Relationship) |
| | (Phone No.) | | (Phone No.) |
| Language Proficiency | (Native Language) | | (Korean Proficiency Level) <input type="checkbox"/> (High) <input type="checkbox"/> (Medium) <input type="checkbox"/> (Low) |



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| | | | |
|--|---|--|--|
| | (English Proficiency Level) <input type="checkbox"/> (High) <input type="checkbox"/> (Medium) <input type="checkbox"/> (Low) | | |
| Occupation | | | |
| Name of Organization (*If you have belonged to any groups for adoptees) | | Careers, Expertise Skills, etc | |
| Write in detail for your careers, expertise, skills incl. engagement in Korean Adoptee Networks, if any. | | | |
| Do you plan to stay in Korea before or after the program? If yes, when and for how long? | <input type="checkbox"/> Yes <input type="checkbox"/> No (When and how long?) _____ | | |
| Dietary Requirements | | Health Related Requirements *Allergies or medical conditions | |
| Have you ever been to Korea before? If yes, when and for what duration? | <input type="checkbox"/> Yes <input type="checkbox"/> No (When and for what duration?) _____ (Purpose of the visit) _____ | | |



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| | |
|--|--|
| <p>What motivated you to apply to this program and any expectations from the Gathering?</p> | |
| <p>Introduce yourself</p> | |
| <p>Introduce your accompanying members</p> | |



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| | |
|--|--|
| <p>Please write a short essay. (e.g., “What I think of Korean”, “Me and Korea”, “Any thoughts/ suggestions on mutual development between Korea and yourself?” and etc.)</p> <p>We might be able to share it with other participants under your consent.</p> | |
| <p>What activities would you like to participate in the PG? (Please list any activities, cultural events, or places of interest in Korea) – for reference</p> | |

I hereby pledge that the above information is all true and I will abide by all the regulations of OKA

Name

(Signature)



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[Appendix 2] * Please download, fill out and attach this form for your accompanying person*

| Application Form (for an accompanying person) (Child/Adoptive parent/Legal Spouse/Guardian/Other) | | | |
|---|---|---|--|
| Self-Introduction | | | Photo |
| | | | Recent Color Photo (3x4cm) |
| Name *Name must match passport (Full Name) Last First Middle _____ (Korean Name), if applicable | | | |
| Sex | <input type="checkbox"/> Male <input type="checkbox"/> Female | | |
| Date of Birth | yy/mm/dd | | |
| Country of Residence | | Nationality | |
| Passport Info. | (Passport Number) | | (Country of Issue) |
| | (Date of Issue) | | (Date of Expiry) |
| Contact Info. | (Home Phone No.) | | (Cell Phone No.) |
| | (E-mail Address) | | |
| Language Proficiency | (Native Language) | | (Korean Proficiency Level) <input type="checkbox"/> (High) <input type="checkbox"/> (Medium) <input type="checkbox"/> (Low) |
| | (English Proficiency Level) <input type="checkbox"/> (High) <input type="checkbox"/> (Medium) <input type="checkbox"/> (Low) | | |
| Dietary Requirements | | Health Related Requirements *Allergies or medical conditions | |

I hereby pledge that the above information is all true and I will abide by all the regulations of OKA.

Name

(Signature)



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[Appendix 3]

Documentation Release

I, the undersigned, hereby give my consent for the reproduction, use, publication, and/or exhibition by Overseas Koreans Agency (OKA) of the image or voice of the person named below, including but not limited to photographs and video recordings. I acknowledge that OKA is not responsible for any claims to damages for libel, slander, invasion of privacy, or any other claim based on use of the aforementioned materials. Neither OKA nor anyone associated with the organization has made any promise of any other compensation in relation to this release.

This release also applies to the employees, agents, licensees, successors, and assignees of OKA.

OKA may use the abovementioned materials:

- OKA website (including SNS)
- Magazines or Newsletters
- All manner of publication and media, including unrestricted use for purposes of education, exhibits, publicity, advertisement, trade, display editorials, fundraising, exhibits, and art.

Name _____ Name (accompanying person, if any) _____

Address _____

City, State, Zip _____

Country _____

Phone Number _____

Signature _____ Signature (accompanying person, if any) _____

Date _____

*** This release must be signed in order to participate in OKA invitation Program**



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[Appendix 4]

Liability Release

In consideration of the person named below (hereinafter referred to as “I”) being allowed to take part as a participant or volunteer counselor in the Invitation Program for overseas Korean adoptees, hosted by Overseas Koreans Agency (hereinafter referred to as “OKA”), the undersigned acknowledges and agrees to the following provisions of this liability release:

1. I understand and acknowledge that the use of facilities and equipment provided by OKA and participation in the Program involves risks including, but not limited to the following: risk of property damage, bodily injury, including, but not limited to permanent disability, paralysis, and possibly death. These risks may result from a variety of circumstances including, but not limited to, the use or misuse of the facilities and equipment, from the activity itself, from the acts of myself/my family’s or others, including OKA and its agents or from the unavailability of emergency medical care.
2. I assume full responsibility for all risks that may arise out of or result from my/my family’s participation in the Program, including but not limited to those risks described in subsection 1, above.
3. In the event that any damage to equipment or facilities occurs as a result of my or my family’s willful actions, neglect or recklessness, I acknowledge and agree to be held liable for any and all costs associated with any actions of neglect or recklessness.
4. I acknowledge that I have read, know, and agree to all of the policies and procedures relating to my/my family’s participation in the Program. I understand that the safe and proper use of all equipment, facilities or participation in activities is dependent upon carefully following these policies and procedures. I agree to comply with and abide by all OKA rules, regulations and policies. I understand that OKA reserves the right to revoke or terminate my participation in the Program for any violations of these rules, regulations and policies. In the event of such revocation or termination, I understand that I shall not be entitled to any reimburse of any costs I have paid or incurred.



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5. I agree that OKA is further released from any claim whatsoever on account of first aid, treatment, or other emergency medical rendered to or on behalf of participant during participation in the Program. I consent to medical treatment for emergencies that occur during or are related to my/my family's participation in the Program where I am unable to consent to such treatment. I agree that this provision, however, does not obligate any Released Party to provide or arrange for any medical treatment for myself or my family. And also I agree to bear the cost of such emergency treatment and to indemnify and hold OKA harmless there from.
6. I acknowledge that OKA does not provide medical care insurance coverage for participant in the Program, and that I am solely responsible for arranging and paying for any such insurance coverage.
7. I acknowledge that OKA is hereby released of any and all lawsuits, claims, or demands for damages due to personal injury, bodily injury, sickness, death, loss of property, property damage, or any other costs or expenses incurred during the course of, as the result of, or in any way connected with participant in the Program.

I HAVE CAREFULLY READ THIS AGREEMENT AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AGREEMENT BETWEEN MYSELF AND OKF AND/OR ITS AFFILIATED ORGANIZATIONS. I SIGN THIS DOCUMENT VOLUNTARILY, OF MY FREE WILL. IN DOING SO, I AM NOT RELYING ON ANY REPRESENTATIONS, STATEMENTS, OR INDUCEMENTS OTHER THAN THOSE WHOSE NAME APPEARS IN THE WRITING OF THIS LIABILITY RELEASE.

Name _____

Address _____

Signature _____

Date _____

*** This release must be signed in order to participate in the OKA invitation Program**



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[Appendix 5]

Personal Information Collection and Use Provision Agreement to Third Parties for Smooth Event Operation and Participant Management

In order to ensure smooth event operation and participant management, we are providing the personal information of participants to the commissioned agency.

<Collection and Usage Agreement>

| Items to be collected and used | The Purpose of collection and use | Period of maintenance |
|--|---|-----------------------|
| Name, Date of birth, Nationality, Contact information, Photo, Career experiences, foreign language proficiency, passport no., etc. | <ul style="list-style-type: none">- To verify the identity of the Individual- To give notice(information) on support and events of OKF- To Utilize as statistical data for service/event planning and providing an optimized service according to the type of the project and the country- To utilize as the basis for the making policy of Overseas Korean- To contribute to the reinforcement of Overseas Korean Adoptees communities | Semi-permanent |

<Recipient of Personal Information>

We will comply with the personal information protection regulations that should be observed by personal information processors as specified in the Personal Information Protection Act of the Republic of Korea, and we will do our best to protect the rights of the subjects.

Those who wish to provide personal information to participate in the "2024 Overseas Korean Adoptees Gathering" have the right to refuse to consent to the provision of personal information to third parties for the above matters.

However, if you refuse to give consent, you may be excluded from participating in this gathering due to the impossibility of smooth event operation such as participant management.

☐ Agree

☐ Disagree

Name:

(signature)



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[Appendix 6]

Personal Information Collection and Usage Agreement (For an Accompanying Person)

In accordance with Article 15 ~ 22 of the PERSONAL INFORMATION PROTECTION ACT (Republic of Korea), I agree to the collection and usage of my personal information in relation to the 『2024 OKA Gathering for Overseas Korean Adoptees』 organized by Overseas Koreans Agency.

■ Collection and Usage Agreement

| Items to be collected and used | The Purpose of collection and use | Period of maintenance |
|--|---|-----------------------|
| Name, Date of birth, Nationality, Contact information, Photo, Career experiences, foreign language proficiency information, etc. | <ul style="list-style-type: none">- To verify the identity of the Individual- To give notice(information) on support and events of OKF- To Utilize as statistical data for service/event planning and providing an optimized service according to the type of the project and the country- To utilize as the basis for the making policy of Overseas Korean- To contribute to the reinforcement of Overseas Korean Adoptees communities | Semi-permanent |

※ Applicants for "2024 OKA Gathering for Overseas Korean Adoptees" have the right to reject consent for application of personal information. If so, he/she may be excluded from the list of candidates for selection.

☐ Agree

☐ Disagree

■ Identification Number Collection Agreement

| Items to be collected and used | The Purpose of collection and use | Period of maintenance |
|--------------------------------|-----------------------------------|-----------------------------|
| Passport number | Identification Purposes | By 2weeks after the program |

※ Applicants for "2024 OKA Gathering for Overseas Korean Adoptees" have the right to reject consent for application of personal information. If so, he/she may be excluded from the list of candidates for selection.

☐ Agree

☐ Disagree

Name:

(signature)