

Application for Eugene Day Care Center

1. Please read the following application guidance for 2020 academic year.

A. Qualification

- 1) Full-time staff and faculty members who work over 40 hours a week and are covered by the four major public insurance at Sinchon & International campus, Industry-Academic Cooperation Foundation(IACF) and Cooperate Secretariat, Yonsei University
- 2) Graduate students enrolled at Yonsei graduate school or professional graduate schools in 2019 fall and 2020 spring semesters(except graduate students majoring in Medicine, Dentistry and Nursing)

B. Applicant numbers and Education expense

Age	1 year old (children born in January 1 to December 31, 2018)
Applicant numbers	18
Education expense per month in 2019	527,000 KRW

- ※ Slots for 2 to 5 years old classes will be placed in the order of waiting list when the placement slot becomes available.
- ※ The above education expense is subject to change in accordance with the guidelines provided by the Ministry of Health and Welfare.
- ※ Special Activity fee is excluded.

C. Selection Method : Raffle

D. Application requirements

- 1) Application Form
- 2) Family relation certificate or residents registration
- 3) Acceptance letter for new graduate students of 2020 spring semester
- 4) Required documents for priority admission
 - a) For a single-parent family : a certificate of single-parent family or etc.
 - b) For a dual-income family : a copy of Employee Health Insurance card of spouse(only for staff and faculty members)
 - c) For a third child : Family relation certificate and etc.
- 5) Child care subsidy payment receipt issued by the affiliated institution : Prescribed form, only for the staff and faculty members from Special Account Institutions, IACF and Cooperate Secretariat

E. Application period and submission info

- 1) Application period :
[November 20\(Wed.\) ~ November 26\(Tue.\), 5:00pm](#)
[After application period, we will text you safe receipt of the documents.]
 - 2) Submit to : **Human resources team, Office of General Affairs(Room. S201, Baekyang Hall)**
- ※ **Strict observance of the deadline (No chance will be given if application arrives after the deadline)**

F. Others

- 1) For new graduate students: If you do not register for 2020 spring semester, the admission will be cancelled.
- 2) If the parent is retired(or graduated, or leave of absence) before the semester ends, the child may stay enrolled at the Day Care Center until the last day of the semester.

2. We will let you know the result via email and text message on [December 6\(Fri\)](#).

3. Please contact the office of Eugene Day Care Center at 02-2123-8266~7 for further questions.

■ Attachments : Application form, Reference Materials(Korean)

Application Form

I apply to the Eugene Day Care Center of 2020 year as follows:

Child	Full Name		Gender	Male / Female
	Foreign Registration Number			
	Priority Admission	Single-parent family() Dual-income family() Third Child () * Proof document :		

Parent	Full Name		Contact Info	Address	
	University ID or Student ID			Home Telephone Number	
	Department			Office Telephone Number	
	Relationship to child	Father / Mother		Mobile Phone Number	
	Foreign Registration Number			E-mail	
	Full Name of Spouse			Office Telephone Number	
	Foreign Registration Number			Mobile Phone Number	
	Occupation			E-mail	
	Company Name				

※ **Attachments**

- 1) Family relation certificate or residents registration
- 2) Acceptance letter for new graduate students of 2020 spring semester
(If the acceptance letter has not been issued yet, the draw will be made on the basis of admission for the year 2020)
- 3) Required documents for priority admission
 - a) For a single-parent family : a certificate of single-parent family or etc.
 - b) For a dual-income family : a copy of Employee Health Insurance card of spouse(only for staff and faculty members)
 - c) For a third child : Family relation certificate and etc.
- 4) Child care subsidy payment receipt issued by the affiliated institution :
Prescribed form, only for the staff and faculty members from Special Account Institutions, IACF and Cooperate Secretariat

Date :

Parent's Name :

Signature :