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Sample Application Guideline for the JICA Knowledge Co-Creation Program (Young Leaders)

This guideline explains how to apply for the Knowledge Co-Creation Program (KCCP) (Young Leaders) of the Japan International Cooperation Agency (JICA) under the Official Development Assistance Program of the Government of Japan.

Please complete the Application Forms according to the guideline. For additional information, please consult the JICA Office, or in its absence, the Embassy of Japan in your country.

Forms to be submitted							
Form1. Application Form							
Form2. Questionnaire on Medical Status and Restrictions							
Form3. Contact Person at Your Organization							
for Post-program Survey about KCCP for Young Leaders							
Form4. Terms and Conditions, and Declaration							

Please be advised:

- (a) To carefully read the General Information (GI) of the KCCP,
- (b) To fill only in typewritten except for signature,
- (c) To fill in the form in English,
- (d) To use " $\sqrt{\ }$ " or "x" to mark the () options,
- (e) To attach your photographs,
- (f) To prepare document(s) described in the GI and/or confer with the JICA Expert or JICA overseas office, and attach these documents to the completed Application Forms,

In submitting the Application Forms and attached documents, please make sure:

- (g) To prepare a copy of your passport,
- (h) To confirm the application procedure stipulated by your government,
- (i) To submit the original Application Forms and all necessary document(s) to the responsible organization of your government according to its application procedure, and
- (j) That your participation may be denied, if you fail to provide all required information and documents completely and on time.

Commented [RPJ1]: Please note that the institutions and individuals used in this form are samples only



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CHECK LIST before submission:

	Items	Form No.	Check
1.	Fill in all items in typewritten	All the forms	
2.	Your signature	Form 1, 2, 4	
3.	Your Photo	Form 1	
4.	Attach a copy of passport (Machine Readable Zone) *Applicants from Latin American and the Caribbean Countries, please refer to the note below.	-	
5.	Attach the required document(s) as instructed in the GI	-	

Note for Applicants from Latin American and the Caribbean Countries:

(1) If you are from any of the countries listed below and have a passport with a valid U.S. visa, please attach herewith a copy of Identification Pages on the inside cover of your passport (i.e. the two pages that include your photograph and detailed passport information), and the page of U.S. visa:

Antigua and Barbuda, Argentina (only Japanese descendants), Barbados, Bolivia, Brazil, Chile, Colombia, Dominica, Ecuador, Grenada, Guatemala, Guyana, Haiti, Mexico, Peru, Rep. of Dominica, St. Christopher and Nevis, St. Lucia, St. Vincent and the Grenadines, Suriname, or Venezuela.

(2) If you are <u>from any of countries listed below</u> and <u>have a passport without a valid U.S. visa</u>, <u>please attach herewith a copy of Identification Pages on the inside cover of your passport</u> (i.e. the two pages that include your photograph and your detailed passport information).

Belize, Costa Rica, El Salvador, Honduras, Jamaica, Marshall, Micronesia, Nicaragua, Palau, Panama, Paraguay, Trinidad and Tobago, and Uruguay.



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Application Form for the JICA Knowledge Co-Creation Program (Young Leaders):

Form1. APPLICATION FORM

※To be filled by Applicant.								
1. Course Title: (as shown in Employment Relations a	the GI) and Industrial Democracy C	ourse	Attach <u>here</u> your photo	Commented [RPJ2]: Course title is based on the				
2. Course Number: (the num 202013400J002	nber as "xxxxxxxxxxxXxxx" shown in th	(taken within the last six months Size: 4.5x3.5cm	Commented [RPJ3]: Course number is based or Description section of the General Information (
Personal Information of Name of Applicant (as shapped the name as shapped arrangements.		he information will be use	ed for flight	material				
Family Name / Surname				Commented [RPJ4]: Format of surname should be the same as your passport				
First Name R E Y E S								
2) Nationality (as shown in the passport)	FILIPINO			Commented [RPJ5]: Input nationality based on passport				
3) Sex	(x) Male	() Female	le					

(as	shown in the passport)							
3)	Sex	1(x)	Male	() Female				
4)	Date of Birth	Date	Month (ex. April)	Age Year (as of the date of the form)				
		23	SEPTEMBER	1998	23			

5) Passport/Visa

Passport possession	(x)Yes	()No	Expiry date	Date	Month	Year
USA visa possession*	() Yes	()No	of passport	27	DECEMBER	2028

^{*}Applicants from Latin America and the Caribbean only.

 $\label{lem:commented [RPJ6]: If passport is expired, mark `No' in the Passport possession section. Input N/A on the$

expiry date.



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6) Contact Information

- /									
	Address: Lot XX. Block XX, XX Village, Brgy. XX, Antipolo City, Rizal								
Private	TEL*: N/A	Mobile*: 0917 XXX XXXX							
	FAX*: N/A	E-mail: lorenzo.lopez@outlook.com							
Office	Address: XXX Center, 1345 XXX Avenu	e cor Osmeña Highway, Manila							
	TEL*: (02) 8552 XXXX loc. XXX	Mobile*: 0965 XXX XXXX							
	FAX*: (02) 8552 XXXX	E-mail: LRLopez@dwp.gov.ph							
	Name: Leonore R. Lopez								
_	Relationship to you: Mother								
Emergency Contact	Address: Lot XX. Block XX, XX Village,	Brgy. XX, Antipolo City, Rizal							
Contact	TEL*: N/A	Mobile*: 0977 XXX XXXX							
	FAX*: N/A	E-mail: lmlopez@pnu.edu.ph							

^{*} Please fill it out from country code for telephone, mobile, and fax number.

7) Present Position

Organization	Department of Work and Pensions									
Year that entered the organization	2019									
Department / Division	Overseas Workers Welfare Division	Overseas Workers Welfare Division								
Title	Workers Welfare Specialist II									
No. of years of service in the present	Years	From (Month/Year)								
position	1	August 2020								
Type of Organization	() Private (profit) () NGO/Priv	al Government () Public Enterprise ate (Non-profit) () University								
Number of employees	10,000+									
Home Page Address	www.gov.ph/dwp									

[Questionnaire on Relationship with the Military]

*If your organization and/or your status is related to the Military, please mark with YES below in the () which best describes the relationship. If not, please mark NO in the () below.

(YES / NO) the Military, an active military personnel or a military personnel listed in the muster roll/military register (YES / NO) an organization affiliated with the Military, or a personnel who does not belong to the military at present but is listed in the muster roll/military register

(YES / NO) the Department or the Ministry of Defense, an organization affiliated with the Ministry of Defense, or staff of the Ministry of Defense

(YES / NO) a civilian organization but with military personnel or a military division within the organization (YES / NO) an organization which will be affiliated with or under the control of the Military in times of emergency as specified clearly in its organic law/law of establishment

Commented [RPJ7]: Input N/A if information cannot be provided

Commented [RPJ8]: An example of 'others' is a GOCC (Government-owned and controlled corporation)

Commented [RPJ9]: Employees in your agency or division. Approximate number will do

 $\begin{tabular}{ll} \textbf{Commented [RPJ10]: Website link}, not email \\ address \end{tabular}$

Commented [RPJ11]: If your agency is **not affiliated** in any form with the military, **remove YES**

If affiliated, remove NO



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4. Experience and Eligibility

					_	
1) Career Background (After gradua	ation and be	fore taking	the present position	1)	Commented [RPJ12]: Input full name (no
	City/	Pe	riod	Position or Title and		acronyms), city and country, career period (month
Organization	Country	From Month/Year	To Month/Year	Department/Division	Brief Job Description	and year), position/division, and brief description of
Department of Work and Pensions	Manila, Philippines	August 2019	July 2020	Workers Welfare Specialist II, Overseas Workers Welfare Division	Assist in the evaluation a monitoring of development policies Assist in the formulation guidelines / methodologic for efficient functioning of the department and the continuing assessment of invelfare programs are services	of ses line line line lits
Philippine National University - Center for Demography and Development Issues	Quezon City, Philippines	January 2018	December 2018	Student Assistant, Policy and Planning Section	Gathered and classified data from information providers for the National Migration Statistics Maintains existir employment-related studie and databases	

2) Academic Background (University, College or Higher Education) Period City/ Institution Major Degree Country Month/Year Month/Year Quezon City, Philippine National University August 2020 Ongoing MIR Labor Policy N/A Philippines Quezon City, Philippine National University August 2015 May 2019 **BA** Sociology N/A Philippines

Commented [RPJ13]: Input full name (no acronyms), city and country, enrolled period (month and year) in an academic institution. Input applicable major if reflected in your TOR

3) Experience of Training or Study in Foreign Countries (including all the training

experiences in sich s	programs	1						
	Citv/	Pe	riod		cond			
Institution	Country	From	То	Field of Study / Program Title				
	Country	Month/Year	Month/Year		Inpu			
International Institute for Human Settlements	New York, NY, USA	February 2020	February 2020	XXth Study Session on Building Government Capacity Diaspora Engagement	coun trair			
SEA Committee on Social Development and Protection	Chiang Mai, Thailand	October 2018	October 2018	SCHG Annual Symposium 2018: 'On Clandes Migration: Facing the Challenges of Exclusion Employment Precarity'				

Commented [RPJ14]: Only include trainings ducted in a foreign country. If none, input N/A.

ut the implementer (institution), venue (city and ntry), period (month and year), and title of the ning program

4) Experience visiting / living in Japan

() Yes	() One month or less	() More than one month	
(x) No			



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5) Languag	e Proficiency (Sel	Commented [RPJ15]: On the English skills section				
1) Language	e to be used in the cou	rse (as in the GI)	English			choose only between Excellent and Good
	Listening	(x) Excellent	() Good	() Fair	() Poor	Commented [RPJ16]: Input 'English'
	Speaking	(x) Excellent	() Good	() Fair	() Poor	
	Reading	(x)Excellent	() Good	() Fair	() Poor	
	Writing	(x)Excellent	() Good	() Fair	() Poor	
0 0	ests Scores if any L, TOEIC, etc.)	N/A				Commented [RPJ17]: For GRF/YL courses, English
2) Mother To	ongue	Tagalog				Test is not required. Input N/A if applicable. If in possession, kindy provide a copy of your official
3) Other lan	guages N/A)	() Excellent	() Good	() Fair	() Poor	TOEFL, TOEIC, or IELTS result Commented [RPJ18]: Input your native language
		1				Commented [KF316]. Input your native language
Excellent		ls and topic-controlled di say types, including nar				
Good		uracy & fluency in a wide nd complex sentences.	sentations &			
Fair		nguage related to expre	estions. Limited			
Poor	Simple conversation tenses.	n level, such as self-intro	oduction, brief question	n & answer using the	present and past	
5. Backgro	ound and Purpos	e of application (to	be completed by	the Applicant)		Commented [RPJ19]: While succinct, descriptions
, -						should not be less than 25 words. Make sure to
,	nal Statement inclo in this program.	uding your Goal: De	scribe the reasons for	your application and	what you intend to	convey why you deserve to be a participant for the
	1 3					program.
		Applicant: Describe p	previous occupational	experiences which ar	re highly relevant t	o the
tnemes	of this program.					

 Area of Interest and/or your expectation: Specify your particular interest with reference to the contents of this program.



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By Applicant

Date September 20, 2022
Name and Lorenzo R. Lopez / Workers Welfare

Title/Position Specialist II

Signature





Application Form for the JICA Knowledge Co-Creation Program (Young Leaders)

Form 2. QUESTIONNAIRE ON MEDICAL STATUS AND RESTRICTIONS

), Name of medicine (

(Self-Declaration)

1.	Ρ	r	е	S	е	r	11	t	ľ	V	l	е	C	li	(3	al	;	S	t	а	t	u	S	
,																									

[] Yes:

Name of illness (

[x] No

(a) Have you taken any medicine or had a medical checkup by a physician for any illness such as diabetes, hypertension, asthma, etc.?

		if yes, please attach your doctor's letter (preferably in English) that describes				
		the current status of your illness, and gives agreement to your participation in				
		the program.				
	(c) Do you have any allergies to the medicine, food, pollen etc.?					
	[x]No	x]No []Yes:				
		What are you allergic to? What kind of allergic symptoms do you have such				
		as itch, rash, hives, etc.?				
		()			
	(d) Please	(d) Please indicate any needs arising from disabilities which may require additional suppor				
	and fac	bilities.				
	()			
	Note: Disab	Note: Disability will not lead to exclusion of the Applicant from the program. However, the Applicant may				
	be inquired	equired directly by the JICA official in charge for a more detailed account of his/her condition.				
	2. Medical	History				
	(a) Have y	ou had any illness such as heart, hepatic, kidney disease, etc.?				
	[x]No	[] Yes:				
		Please specify ()			
	(b) Have you or/and your family members had tuberculosis?					
	[x]No	[] Yes:				
		Please specify ()			
	(c) Have you ever been a patient in a mental clinic or been treated by a psychiatrist?					
	[x]No	[] Yes:				
		Please specify ()			
(d) Have you ever had any sleeping, eating or other disorders?						
	[x]No	[] Yes:				
		Please specify ()			
		name of medicine taken if any (

Commented [RPJ20]: If yes, kindly provide a medical certificate indicating that you are fit to attend the training program



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3. Other Medical Issues/Conditions

If you have any medical issues/conditions that are not described above, please indicate below.

N/A				
Are you pregnant?				
[x]No	[] Yes:			
	[] Yes: Weeks of pregnancy (weeks)		

I certify that I have read the above instructions and answered all questions truthfully and completely to the best of my knowledge.

I understand and accept that medical conditions resulting from an undisclosed pre-existing condition may not be financially compensated by JICA, and may result in termination of the program.

I understand and accept that this questionnaire will be checked for my health care by the people who are engaged in the program during my stay in Japan.

By Applicant				
Date	September 20, 2022			
Name and	Lorenzo R. Lopez / Workers Welfare			
Title/Position	Specialist II			
Signature				

<u>XPlease notify JICA staff upon any changes in your health condition after submission of the form.</u>



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Application Forms for the JICA Knowledge Co-Creation Program (Young Leaders

Form3. CONTACT PERSON AT YOUR ORGANIZATION FOR POST-PROGRAM SURVEY ABOUT KCCP FOR YOUNG LEADERS

JICA conducts ex-post questionnaire surveys on Participants of the KCCP for Young Leaders in order to understand how Participants utilize the knowledge acquired in Japan in their daily work. For this purpose, JICA would like to send Participants a questionnaire by e-mail after the program.

In addition, considering the purpose of the survey, we also would like to send the questionnaire to persons other than the Participants such as their supervisor or the person in the human resources department, who can observe changes in Participants' attitude in performing his/her tasks after the program.

We would highly appreciate it if you could give us the name to whom JICA can send the questionnaire(s). Please fill in the following tables. The questionnaire(s) will be directly sent by e-mail to the Applicant and the person given below within 1 year after the program. We kindly ask for your understanding and cooperation for implementing the survey.

[Name of Applicant]

Name	Lorenzo R. Lopez

[Contact Person at Applicant's organization] (Applicant's supervisor or a person in the human resources department to whom JICA can send the questionnaire after the program)]

Name	Atty . Jaime A. Lauriel
Designation / Position	Division Chief
Department / Division	Department of Work and Pensions / Overseas Workers Welfare Division
E-mail Address	JALauriel@dwp.gov.ph

Commented [RPJ21]: Input the details of your supervisor or HR representative who can be contacted after the program



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Application Forms for the JICA Knowledge Co-Creation Program (Young Leaders)

Form4. TERMS AND CONDITIONS

1. General Rules

The participants are requested:

- (1) to strictly observe the course schedule,
- not to change the air ticket (and flight class and flight schedule arranged by JICA) and lodging by the participants themselves,
- (3) to understand that leaving Japan during the course period (to return to home country, etc.) is not allowed (except for programs longer than one year),
- (4) not to bring or invite any family members (except for programs longer than one year),
- (5) to carry out such instructions and abide by such conditions as may be stipulated by both the nominating Government and the Japanese Government in respect to the course,
- (6) to observe the rules and regulations of the program implementing partners to provide the program or establishments,
- (7) not to engage in political activities, or any form of employment for profit,
- (8) to discontinue the program, should the participants violate Japanese laws and JICA's regulations, or the participants commit illegal or immoral conduct, or get critical illness or seriously injury and be considered unable to continue the course,
- (9) to return the total amount or a part of the expenditure for the KCCP depending on the severity of such violation, should the participants violate the laws and ordinances,
- (10) not to drive a car or motorbike, regardless of an international driving license possessed,
- (11) to observe the rules and regulations at the place of the participants' accommodation, and
- (12) to refund allowances or other benefits paid by JICA in the case of a change in schedule.

2. Privacy Policy

The participants are requested to understand Privacy Policy of JICA as follows.

(1) Scope of Use

Any information used for identifying individuals that is acquired by JICA will be stored, used, or analyzed only within the scope of JICA activities. JICA reserves the right to use such identifying information and other materials in accordance with the provisions of this Privacy Policy.

(2) Limitations on Use and Provision

JICA shall never intentionally provide information to a third party that can be used to identify individuals, with the following three exceptions:

- (a) legally mandated disclosure requests;
- $(b) \ \ the information provider grants permission for information disclosure to a third party;$
- (c) JICA commissions a party to process information collected, in which case the information provided will be within the scope of commissioned tasks.

(3) Security Notice

JICA takes measures required to prevent leakage, loss, or destruction of acquired



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information, and to otherwise properly manage such information.

*Information Security Policy of JICA in relation to Personal Information Protection

- JICA will properly and safely manage personal information collected through Application Forms in accordance with JICA's Privacy Policy and the relevant laws of Japan concerning protection of personal information and take protection measures to prevent divulgation, loss or damages of such personal information.
- Unless otherwise obtained approval from the Applicant him/herself or there are valid reasons such as disclosure under the laws and ordinances, etc. and except for the reasons in 1-3 below, JICA will neither provide nor disclose personal information to any third party. JICA will use personal information provided only for the purposes in 1-3 below and will not use the information for any purposes other than those described in 1-3 below without prior approval of the Applicant him/herself.
- 1. To provide the KCCP to Participants.
- 2. To provide the KCCP to Participants under the Citizens' Cooperation Activities.
- In addition to 1 and 2 above, when the government of Japan or JICA determines it necessary in technical cooperation.

**IJICA's policy for the transfer of personal data from the European Economic Area(EEA) to outside the EEA (to Japan and third countries);

JICA has revised "Bylaws for the Implementation of Personal Information Protection" which was published based on Japan's legislation by adding new provisions regarding how to deal with personal data within the EEA in order to meet General Data Protection Regulations (GDPR's) requirements for data protection. Based on the new bylaws, JICA entered into the EU Standard Contractual Clauses (SCCs) which allows us to transfer personal data from offices within the EEA to offices outside the EEA (in Japan and third countries).

3. Copyright Policy

The participants are requested to comply with the following;

- The participants shall use all the documents provided for the KCCP (including texts, materials, and etc.), within the scope approved by each copyright holder.
 If the participants apply to online KCCP, the participants shall also comply with terms of use of copyrighted works for the online KCCP that are shown on the JICA website. (https://www.jica.go.jp/english/our_work/types_of_assistance/tech/acceptance/training/index.html)
- 2. All the documents for the KCCP (including reports, action plans, presentations, and etc.) shall be prepared by the participants themselves in principle. If the participants use a third party's work (reproduction, photograph, illustration, map, figures, etc.), which is protected under the laws and regulations in the participants' country or copyright-related multinational agreements, the participants shall obtain a license to use the work within the scope approved by the copyright holder.



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The participants shall agree that JICA may use the documents prepared by the
participants (including but not limited to reproduction, public transmission, distribution
and modification) for other programs conducted by JICA (for example, as references for
other KCCP courses and project formulation).

4. Portrait Right Policy

During the implementation period of KCCP, JICA (including hired photographer and program implementing partners) will shoot photographs and video footage mainly for the following purposes:

- · Use on the website or in SNS administrated/operated by JICA,
- Use in JICA publications (public relations magazines, annual reports, journals, etc.) in printed or electronic form,
- *Photos and images taken will not be used for commercial purposes and the participants' personal information will not be disclosed to any third party without the consent of the participants.

JICA would appreciate it if the participants of KCCP grant the participants themselves portrait right license to JICA for photos and images taken described above.

It is, however, not a requirement of KCCP. The participants do not agree to grant the participants themselves portrait right license to JICA, has absolutely no problem in participating KCCP. JICA respects the intention of each Participant.

DECLARATION (to be signed by Applicant)

- I understand and fully agree to the following terms and conditions set forth above.
 - 1. General Rule
- 2. Privacy Policy
- 3. Copyright Policy
- I will be subject to any penalties imposed as a consequences of my failure to abide by the above terms and conditions.
- I understand the intention of JICA on "4.Portrait Right Policy" mentioned above, and my intention for usage/publication of photographs and videos including the portrait of myself by JICA for the purposes above is as follows:

 [x] Agree
 Disagree
- I certify that the statements I made in this form are true, complete and correct to the best of my knowledge and belief.

By Applicant

Date September 20, 2022

Name and Lorenzo R. Lopez / Workers Welfare Specialist II

Title/Position

Signature

Commented [RPJ22]: Mark 'Agree'