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| **Letter of Recommendation**  **2013 KOMACON’s Comic Artist Residency**  **추천장** |

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| --- | --- |
| Organization 단체명 : |  |
| Address 주소 : |  |
| Contact Person 담당자 : |  |
| Phone 전화번호 : |  |
| Mobile 핸드폰번호 : |  |
| E-mail 이메일 : |  |
|  |  |
| Recommended cartoonist :  추천만화작가 | Mr. Ms. |
|  |  |
| Reason for recommending  추천사유 |  |

We submit this letter of recommendation as above

우리는 위와 같이 추천장을 제출합니다.

Submission Date 제출일자 :

Recommender 추천인 : (signature)

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| **Application Form**  **2013 KOMACON’s Comic Artist Residency**  **참가 신청서** |

1. **Personal Data 개인정보**

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | | | | | | | | | |
| Name  성명 | In Native Language  현지어 | |  | | | | | Photo  사진 | |
| In English  영문 | |  | | | | |
| Nationality  국적 |  | | Date of Birth | | 2012.10.10hnisted candidateng | | |
| Address  주소 |  | | | | | | | | |
| E-mail 이메일 |  | | | | | | | | |
| Blog or Website |  | | | | | | | | |
| Phone 전화 | +86 | | | Mobile 핸드폰 | | | + | | |
| **2. Education / Experience 교육/ 경력**   1. **At which institute 교육** | | | | | | | | | |
|  | | | | | | | | | |
| Period 기간 | | Name of school 학교명 | | | | Major 전공 | | | Location 위치 |
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**b. A selection of the 5 most important project/exhibitions /Publication**

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| Period 기간 | Place 장소 | **Name Project/exhibition** | **Details** |
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1. **Honors And Award 수상경력**

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| --- | --- | --- | --- |
| Date 기간 | Institute 기관 | **Name Honors/Award 상명** | **Remark 비고** |
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. **3. Language 언어**

**Do you speak English? ㅇ little ㅇ Reasonably ㅇ Well ㅇ Fluently**

**4. Self introduction** 자기 소개

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| *A brief explanation about yourself , a personal description*  *Ex) Enthusiasm on Comics , Experiences in international festivals, interest on korean culture and comics, etc.* |

**5. Work Plan** 활동계획

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| *A brief explanation or motivation and work plan concerning the residency in relation to present work plus a visual print or drawing to support your plan.* |

**6 Digital Images** 디지털이미지

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|  |
| Please attach representative examples of artistic achievements & proof of references.  in free style form here or in separated attachment .   * Max 15 images are required * The images must clearly show a development over the past 3 to 4 years * Preferably images of individual works, no more than 3 views / details per work. * The file must be in JPEG format( max 800x600 pixels) |

**7 . Payment 지급**

Please mark the percentage in the box

|  |  |  |  |
| --- | --- | --- | --- |
| **Article** | **Sponsored by organization** | **Artist** | **KOMACON** |
| Roundtrip airfare | *Ex)10%* | *Ex) 30%* | *Ex) 60%* |
| Living Cost |  |  | ***N/A*** |

Roundtrip airfare

* State the maximum payment or the percentage of possible payment.

위 비용을 부담하는 곳/사람의 최대 가능한 비용의 부담율 표기

* The remaining of the airfare will be covered by the KOMACON
* 신청자 부담금액을 제한 나머지 항공비는 진흥원이 부담함
* However, with less or no coverage by the KOMACON will be given an advantage during the examination process.

단, 진흥원의 부담율이 없거나 적을수록 선정 심사에서 유리하게 작용할 수 있음

Living cost

Living cost should be covered by artist or sponsor organization

생활비는 작가 또는 후원기관에서 부담하여야만 한다.

I submit this grant application, enclosing all required documents.

본인은 소정의 서류를 첨부하여 위 신청서를 신청합니다.

Submission Date 제출일자 :

Applicant 지원자 : (signature)