

<Becas de Maestría 2026>

PROGRAMA DE FORTALECIMIENTO DEL TALENTO HUMANO - CIAT

29/Septiembre/2025

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Parte 1.

Agencia de Cooperación Internacional de Corea - **KOICA**

KOICA

Mandato Organizacional

- Contribuir al avance de la cooperación internacional a través de diversos proyectos que construyen relaciones amistosas, colaborativas e intercambios mutuos entre Corea y los países en desarrollo, apoyando el desarrollo económico y social de estos países.

Programas & Proyectos

- Financiamiento de proyectos de desarrollo,
- Fortalecimiento del talento humano,
- Programa de expertos,
- Programa de voluntarios.

Fortalecimiento del TT.HH

- Cursos país,
- Cursos globales,
- **Programa de maestrías**

KOICA desde 1991 ha entregado 1.394 becas para el fortalecimiento del talento humano ecuatoriano

Parte 2.

Programa de Becas de 2026

Becas de Maestría 2026



Becas de Maestría 2026

No.	PROGRAMA DE ESTUDIO	UNIVERSIDAD	ESTUDIANTES	PAÍSES
1	Master's Degree Program in Smart-City Management and Technology	Hanyang University	75	95
2	Master's Degree Program in Public Management and Administrative Reform	Graduate School of Public Administration Seoul National University		
3	Master's Degree Program in Gender Equality	Graduate School of International Studies Ewha Womans University		
4	Master's Degree Program in Tax and Fiscal Policy	Korea University		
5	Master's Degree Program in Global Education Leadership	Korea National University of Education		

<https://drive.google.com/drive/folders/1MrGYpptSktlQd1PP76XwulcRQyj0ZLuX?usp=sharing>

Criterios de Elegibilidad



Funcionarios públicos de nacionalidad ecuatoriana



Títulos universitarios de tercer nivel (ITTTS a criterio de la universidad en Corea)



Experiencia laboral de al menos 2 años en el campo de estudio de la maestría



Buena salud física y mental



Buen manejo de inglés



No haber obtenido una previamente una beca de estudios de maestría a través de KOICA o cualquier otra institución pública coreana

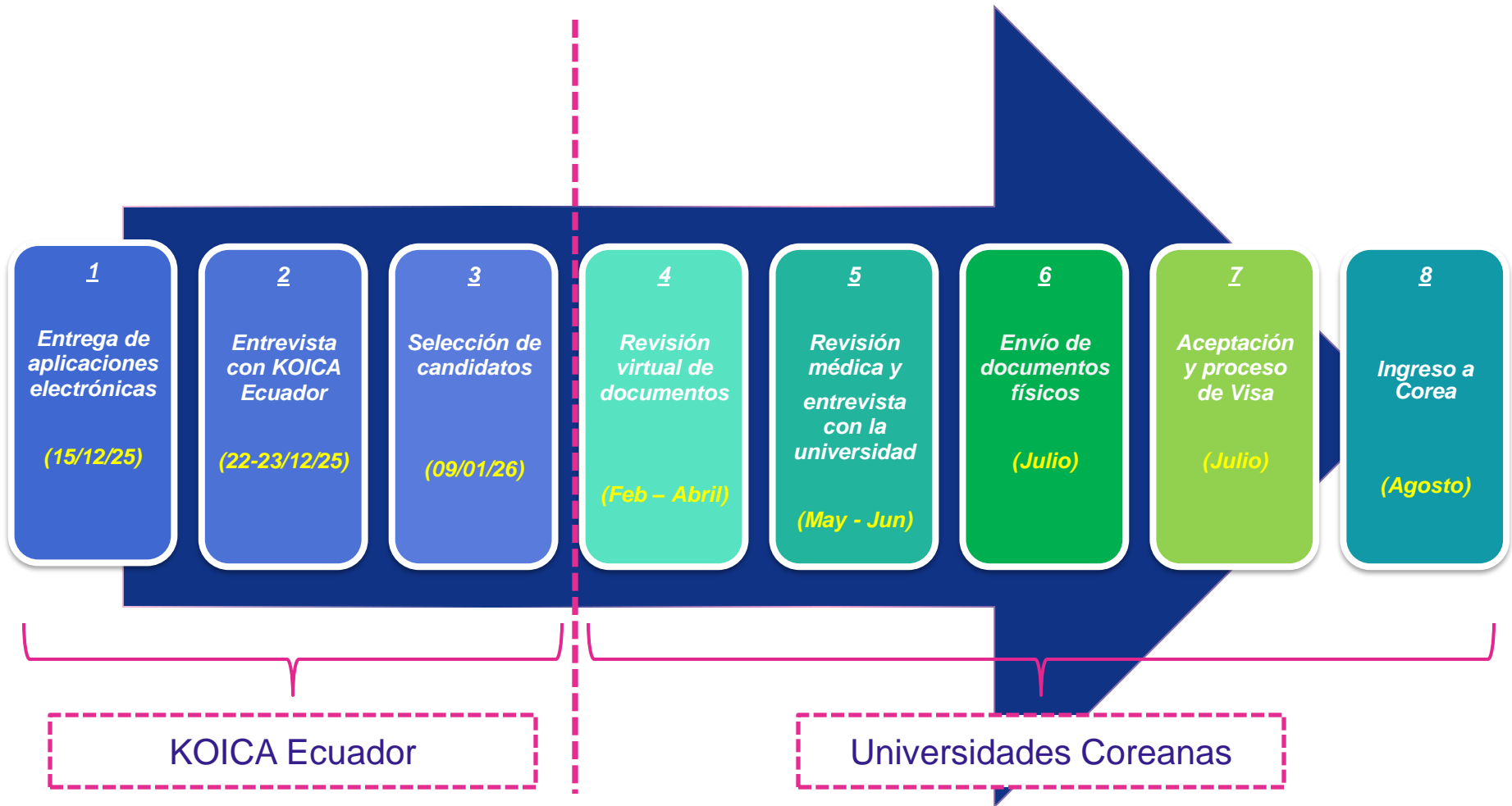


Recomendados oficialmente por parte del Gobierno Ecuatoriano

Cobertura de la Beca



Proceso de Selección



Parte 3.

Formatos de **Aplicación**

Formato de Aplicación de KOICA

IMPORTANTE

1. Lea bien cada hoja del formato y no omita ningún detalle.
2. Llene a computadora.
3. Todo en inglés.

KOICA-CIAT
Korea International Cooperation Agency (KOICA) / Korea International Cooperation Agency (CIAT)
22 Gwanggyo-ro, Yongsong, Seoul 150-850, Korea

Application Guidelines

In completing the attached application form, please be advised to:

1. Carefully read your **Application Guidelines** and **Program Information** prior to completing the application form.
2. Application should be typed, not handwritten, except for your signature; handwriting is not acceptable. Fill in the form in **English**.
3. Fill in the form in **English**.
4. Be sure to fill in **every part** of the form.
5. Send the completed form to the KOICA Office in your country or the Embassy of Korea (if the KOICA Office is not available) together with a **copy of your passport**; and
6. Be reminded that your participation may be denied if you fail to provide the required information and documents completely and on time.

Application Checklist

Item	Page No.	Check if completed
a. Filled in every item of Applicant Information	2-3	<input type="checkbox"/>
b. Tickled agree/disagree box for Agreement on Collection and Use of Personal, Sensitive, and Sensitive Information	5-6	<input type="checkbox"/>
c. Thoroughly read Scholarship Program Guidelines and Code of Conduct	6-9	<input type="checkbox"/>
d. Signed the declaration for terms and conditions	5	<input type="checkbox"/>
e. Signed and filled in every part of Medical History Questionnaire	10	<input type="checkbox"/>
f. Had an authorized official from your government to complete and sign the Nomination form	11	<input type="checkbox"/>
g. Have a copy of passport ready for submission	-	<input type="checkbox"/>


This is to certify that I have completed every part of the application form to apply for the KOICA Scholarship Program.

Date: _____ Applicant's Name: _____ Signature: _____

KOICA-CIAT
Korea International Cooperation Agency (KOICA) / Korea International Cooperation Agency (CIAT)
22 Gwanggyo-ro, Yongsong, Seoul 150-850, Korea

Application Form for the KOICA Scholarship Program

This form is to be used to apply for the Scholarship Program of the Korea International Cooperation Agency (KOICA), which is implemented as part of the Official Development Assistance Program of the Government of Korea. Please complete the application form and consult with your respective country's KOICA Office - or the Embassy of Korea in charge of your country, if the former is not available - for further information.



(Photo)

PART I. APPLICANT INFORMATION (to be completed by the applicant)

I. PROGRAM APPLICATION (to be completed by the applicant)

Program Title			
Name of Degree			
Duration	From	To	(DD-MM-YYYY)

II. PERSONAL DATA


Name (as in the passport)	First Name			
	Middle Name			
	Family Name			
Date of Birth	Day	Month	Year	
Sex	<input type="checkbox"/> Male	<input type="checkbox"/> Female	Height of Applicant	
Religion	Religion			
Home Address				
Contact Information (including Country Code)	Telephone		Fax	
	Mobile		E-mail	
Emergency Contact	Name	Relation		
	Telephone		E-mail	
Emergency Contact (2)	Name	Relation		
	Telephone		E-mail	

III. CURRENT EMPLOYMENT

Organization	
Department	
Present Position	Employment Duration From To present (DD-MM-YYYY)
Type of Organization	Government <input type="checkbox"/> Central <input type="checkbox"/> Local <input type="checkbox"/>
	Non-Government <input type="checkbox"/> Public <input type="checkbox"/> Private <input type="checkbox"/> School/Board <input type="checkbox"/> Other <input type="checkbox"/>
	Other (Please specify)
Job Description: Describe your main duties. Specify any technical equipment or facilities you work on with.	

Recuerde poner su foto digital

Dirección pueden ponerla en español



KUICA-CIAT
Korea-U.S. International
Cooperation Institute

Form No. [KUICA-CIAT-APP-001-2023](#) / Issue : 2023.09.01 (2023.09.01)
 2023.09.01 (2023.09.01) / Revision : 1.0 (2023.09.01)

Job Description

Describe your main duties. Specify any technical equipment or facilities you work on with if applicable.

Describe any themes, topics and places of interest you would like to see in the Program related to your tasks mentioned above/ast.

Elaborate on organizational setback or challenges that you wish to address through the Program.

Elaborate on your plans to apply the lessons learned from the Program to your organization.

VI. CAREER RECORD

Career Background (First 5 Years)

Organization	Department	Position / Responsibilities	Period (MM/YYYY)	
			From	To

Educational Background (Higher Education)

Institution	City / Country	Field of Study and Degree	Period (MM/YYYY)	
			From	To



KOICA-CIAT
Korea International Cooperation Agency - Center for International Training

Homepage: <http://www.koica.go.kr/en/ko> | Email: koica@koica.go.kr
 820 Cheongwon-daero, [Seongnam, Gyeonggi-do](#) | Tel: 031-2700-1100, Korea

Previous Attendance to Training Program in Foreign Countries

Have you previously attended any courses sponsored under JICA/ODA of Korea (ODA-CJ) or of other countries?			<input type="radio"/> Yes <input type="radio"/> No If yes, please specify as below
Training Institute	City / Country	Course Title	Period (MM/YYYY) From To

V. LANGUAGE PROFICIENCY

Native Language(s): _____

English	Excellent	Good	Fair	Basic	Remarks
Listening					
Speaking					
Reading					
Writing					

Other Language(s) studied: _____

English	Excellent	Good	Fair	Basic	Remarks
Listening					
Speaking					
Reading					
Writing					

1. Excellent: Profound fluency skills and highly controlled discourse; obtains full comprehension; formulates dialogues in deal with various usage types, including narrative, comparison, cause-effect, argumentative usage.

2. Good: Conventional fluency in fluency in a wide range of situations; discourses, short presentations is effortless; Compound complex sentences; Extended topic formation.

3. Fair: Broad range of language related to expressing opinions, giving advice, making suggestions; limited compound and complex sentences; Expanded single topic formation.


4. Basic: Starts conversation with, such as self-introductions, brief question or answer, simple present and past tenses.

VI. OTHERS

Any restrictions on food, behavior, or medication due to health or religious reasons?

Restriction on Food/Behavior/ Medication	= NO	= YES, <u> for </u>	= No limit	= No Food	= No Faith
= Others					

Formato de Aplicación de KOICA



Website: <http://www.koica.or.kr/CIAT/> | Email: ciat@koica.or.kr
 332 Daewang-ro, Gyeonggi-do, Suwon-si, Korea

PART 2. TERMS & CONDITIONS

Applicants should read, abide by, and respect the following terms and conditions. Failure to abide by the following may result in disqualification from the program and report to applicant's government and employer.

1. PRIVACY AND COPYRIGHT POLICY ON THE USE OF PERSONAL DATA

- Any information used for identifying individuals that is acquired by KOICA will be stored, used and/or analyzed only within the scope of KOICA activities, and in accordance with KOICA's policy and regulations.
- KOICA may provide and disclose the collected information stored to a third party in accordance with KOICA's policy and regulations, with the relevant laws of Korea, or upon the request from the Government of Korea.
- KOICA reserves the right to use all the documents or products produced by participants for the purpose of the Fellowship Program including their duplication, translation, distribution, and posting on KOICA's website or other websites related to KOICA's ODA.
- KOICA takes measures required to prevent leakage, loss, or destruction of acquired information. Should you wish to inquire further about KOICA's privacy policy and personal information management, please contact the program manager via the contact information provided in your Program Information (PI).
- If you do not approve all the above conditions, you may also refuse to agree. However, please be informed that there may be limitations to your participation in the KOICA Fellowship Program. If you do not agree with the above conditions.


Agreement on Collection and Use of Personal Data

① KOICA collects and uses the participant's Personal Information, and is able to provide such information for a third party in accordance with KOICA policy and regulations.

- Personal Information Collected: Name, date of birth, sex, nationality, contact information, employment status, career and educational record
- Purpose: Implementation and promotion of the KOICA Fellowship Program, identification of participants, record keeping, offline-staffs database management, supporting KOICA's activities, and strengthening the partnership between Korea and Partner Countries
- Retention Period: 1 year for hard copy / 20 years for soft copy
- Third Parties: Ministry of Foreign Affairs, Ministry of Education, Ministry of Culture and Sports and Tourism, Ministry of Science and ICT and their affiliated organizations

② If you do not approve our collection and use of your personal information, you may also refuse to agree. However, you may have limited support from KOICA regarding visa issuance, immigration management, flight and accommodation arrangement, KOICA Club activities, insurance and medical service.

☒ Agree
 ☐ Disagree



Website: <http://www.koica.or.kr/CIAT/> | Email: ciat@koica.or.kr
 332 Daewang-ro, Gyeonggi-do, Suwon-si, Korea


Agreement on Collection and Use of Sensitive Information

① KOICA collects and uses the participant's Sensitive Information, and is able to provide such information for a third party in accordance with KOICA's policy and regulations.

- Sensitive Information Collected: Religion, medical information
- Purpose: Implementation and organization of the KOICA Fellowship Program in consideration of participants' religious characteristics, screening of participants' health condition to participate in KOICA Fellowship Program, insurance and medical service
- Retention Period: 1 year for hard copy / 20 years for soft copy
- Third Parties: Ministry of Foreign Affairs, Ministry of Education, Ministry of Culture and Sports and Tourism, Ministry of Science and ICT and their affiliated organizations

② If you do not approve our collection and use of your sensitive information, you may also refuse to agree. However, you may have limited support from KOICA regarding your religious activities and requirements, insurance and medical service.

☒ Agree
 ☐ Disagree



Website: <http://www.koica.or.kr/CIAT/> | Email: ciat@koica.or.kr
 332 Daewang-ro, Gyeonggi-do, Suwon-si, Korea

Agreement on Collection and Use of Unique Identifying Information

① KOICA collects and uses the participant's Unique Identifying Information, and is able to provide such information for a third party in accordance with KOICA policy and regulations.

- Unique Identifying Information Collected: Passport number, alien registration number
- Purpose: Visa issuance, immigration management, flight and accommodation arrangement, insurance and medical service
- Retention Period: 5 years after the accomplishment of the purpose specified above
- Third Parties: Ministry of Foreign Affairs, Ministry of Education, Ministry of Culture and Sports and Tourism, Ministry of Science and ICT and their affiliated organizations

② If you do not approve our collection and use of your unique identifying information, you may also refuse to agree. However, you may have limited support from KOICA regarding visa issuance, immigration management, flight and accommodation arrangement, insurance and medical service.

☒ Agree
 ☐ Disagree

II. SCHOLARSHIP PROGRAM PARTICIPANT GUIDELINE

1. Purpose

This guideline aims to provide necessary guidance to help to create a sound environment for the study of participants under the KOICA scholarship program.



2. Definition of Terms

The terms used in this guideline are defined as follows:



2-1. 'KOICA': a Korean organization dedicated to ODA, is in charge of the scholarship program, entrusting it to universities and providing funding.

2-2. 'Scholarship program (SP)': one of the Fellowship programs provided by KOICA, refers to a master's degree.

Formato de Aplicación de KOICA

 <p>Homepage: www.koica.go.kr / Email: koica@koica.go.kr 107-8400 Sejong-ro, Sejong City, 30549, Korea</p>	 <p>Homepage: www.koica.go.kr / Email: koica@koica.go.kr 107-8400 Sejong-ro, Sejong City, 30549, Korea</p>
<p>program, aiming to enhance key leaders who can contribute to economic and social development of partner countries.</p> <p>2-3 "University" refers to the university that is introduced by KOICA to operate and be responsible for the SP.</p> <p>2-4 "Participants" refer to individuals participating in the SP under the nomination of the government of partner countries. Upon enrollment, the participants are entitled to be provided with adequate support as students of the university, and bear the corresponding responsibilities.</p> <p>3. Entering and staying in Korea</p> <p>3-1 In principle, participants are not allowed to accompany their family members. However, participants may invite their family members after the duration of one month.</p> <p>3-2 It should be noted that only the person whose name appears in the invitation letter sent by KOICA is considered as a program participant. No others will be given any support and attention when entering and staying in Korea.</p> <p>3-3 KOICA shall not be held responsible for any undertakings or consequences arising from the non-compliance of 3-1 and 3-2.</p> <p>4. Leaving the Korea</p> <p>4-1 Participants shall leave Korea on the designated day for leaving the country.</p> <p>4-2 If a participant loses one's status as a KOICA SP participant pursuant to the guideline 5, "Dismissal of Participant Status", he or she shall leave Korea within 3 days from the date the dismissal is decided.</p> <p>4-3 If a participant has to submit his or her stay in Korea, or leave for a third country other than his or her home country, due to inevitable circumstances, a written approval from the home government should be submitted to the KOICA head office through the Korean embassy in the home country.</p> <p>4-4 Even in the case for the guideline 5.3, the approval responses shall be issued by the participant.</p> <p>5. Dismissal of Participant Status</p> <p>5-1 Participants will lose their status as SP participants if they commit any of the following acts or fall under any of the situations described below.</p> <ul style="list-style-type: none"> ① Falsifying statements on any of their application documents or providing false information in their application documents. ② Receiving serious disciplinary actions, such as suspension or expulsion from the university. ③ Violating the Immigration. ④ Temporarily leaving Korea for more than once without permission. ⑤ Involved in any political activities. ⑥ Violation of the agreement with KOICA. ⑦ Failure to follow the decisions made by KOICA regarding the program intentionally. ⑧ Behaving disgracefully as a participant of a SP. ⑨ Withdrawal from the program before completion. ⑩ Failing to leave Korea within the given time frame as stated in this guideline 4 of this guideline Leaving the Korea. <p>5-2 If a participant loses his or her status as a KOICA SP participant, KOICA will notify the head of the Korean diplomatic establishment abroad and the government of the participant's home country of the fact.</p> <p>6. Leaving Korea During the Program</p> <p>6-1 If a participant intends to return to one's home country during the course of the program, due to unavoidable reasons such as serious illness, domestic affairs, or an urgent summons from the home government, he or she must acquire prior approval from the university with the following documents.</p> <ul style="list-style-type: none"> ① A copy of the medical certificate (for absence leave). ② Letter of explanation. 	<p>③ Any other documents required by the university.</p> <p>6-2 If a participant has to return to his or her home country due to his or her own fault, and not for any of the reasons stated in 6-1 of this guideline, KOICA will notify the participant's original place of enrollment and the home government of the fact. The participant may not re-apply for any KOICA training programs in the future.</p> <p>7. Temporary Leave</p> <p>7-1 If a participant wishes to leave Korea temporarily during the duration, he or she must obtain approval from the university with the following documents by the date set by the university.</p> <ul style="list-style-type: none"> ① Letter of confirmation from the university. ② A copy of a round trip air ticket. ③ A copy of travel insurance (when traveling to a third country). ④ Any other documents required by the university. <p>7-2 Temporary leave during the semester (including during summer and winter holidays and orientation programs) is not allowed. Absenteeism will be made only for inevitable reasons, such as death of family members or a marriage of the participant. Even in these cases, a prior approval must be obtained from the university and KOICA.</p> <p>7-3 For the days of the temporary leave, daily allowance will be deducted for each day of a leave (including days of departure and re-entry). And there will be no exception for deduction.</p> <p>7-4 In case of death of an immediate family member (only for participants' own parents, spouse, and children), KOICA will support traveling expenses for temporary leave.</p> <p>8. Scholarship Payment and Receipt</p> <p>8-1 The matters regarding the payment receipt of scholarship shall be directly KOICA.</p> <p>8-2 Scholarship may not be given out under the following cases. However, if KOICA acknowledges the inevitable nature of the matter of the withdrawal from the SP, the participant may receive support for his or her return.</p> <ul style="list-style-type: none"> ① Failure to leave Korea within the given time frame, for reasons other than inevitable reasons for departure stated in 4-3 of this guideline. ② Dismissal of a KOICA participant status as stated in 5. Dismissal of Participant Status. ③ Withdrawal and leaving Korea during the program for reasons other than stated in 5-1. <p>9. Notification of the entry</p> <p>If a participant is absent Korea within the allowed period for a temporary leave, the participant shall report his or her return to the person in charge of the university.</p> <p>10. Notification of Changes in Contact Information</p> <p>If there are any changes in the contact information of a participant, the change must be reported immediately to the university.</p> <p>11. Internship</p> <p>11-1 Participants must follow the regulations regarding internship, in order to guarantee full commitment to SP and create a "study-first" environment.</p> <ul style="list-style-type: none"> ① Participants must give top priority to their studies over any other activity. ② Internship activities related to research and academic activities of a participant's area of studies, are allowed upon approval of the university. <p>11-2 If a participant earns more than KRW 26,000 a day from the internship, his exceeding amount will be deducted from every daily allowance.</p>

Formato de Aplicación de KOICA

<div>  <div> www.koica.go.kr www.ciat.or.kr KOICA Development Cooperation Center, 1000, Yuseong-ro, Yuseong-gu, Daejeon, 30538, Korea </div> </div>	<div>  <div> www.koica.go.kr www.ciat.or.kr KOICA Development Cooperation Center, 1000, Yuseong-ro, Yuseong-gu, Daejeon, 30538, Korea </div> </div>
<p>12. Applicable Provisions For any other matters not stipulated in this guideline, the academic regulations of the participant's registered university shall be applied.</p> <p>III. CODE OF CONDUCT</p> <p>1. Purpose The Code of Conduct for participants of the KOICA Scholarship Program (hereafter "Code of Conduct") aims to provide both ethical and behavioral standards for the participants to ensure the successful completion of the KOICA Scholarship Program (hereafter "SP").</p> <p>2. Application and Compliance This Code of Conduct applies to all participants of the KOICA SP.</p> <p>3. Academic Performances 3-1. Participants follow the instructions and guidance provided by the professors and faculty after university that they have enrolled in (hereafter "university") to facilitate their studies. 3-2. Participants faithfully attend their university classes and become fully involved in their studies in accordance with the regulations and guidelines of the universities. 3-3. In order to secure appropriate academic achievement, temporary leave or travel to a third country during the course of the semester is, in principle, not allowed. For temporary leave or travel to a third country during the semester and winter vacations, a participant must gain approval from the university. 3-4. Participants shall not work employment or commercial activities for personal gains, except for internship programs approved by the University.</p> <p>4. Program Outcomes Participants shall return to their organization of origin upon the completion of SP and try to apply knowledge and skills they acquired from SP to contribute to the development and advancement of their home country.</p> <p>5. Health Management Participants are recommended to make efforts to stay healthy by working out regularly and seeking medical care if necessary. If and when Participants experience a deterioration in health that may require care from medical professionals, they must report such medical issues to the university to get necessary help.</p> <p>6. Safety Measures 6-1. Participants must refrain from visiting places that may be dangerous, or getting involved in acts that may cause safety accidents. For any damages caused by voluntary actions that violate the code of conduct, the participants in question shall bear full responsibility. 6-2. If and when accidents or situations occur that may put participants at risk, SP participants shall immediately report the matter to the University to seek necessary help. However, if it is found and determined that SP participants are responsible for the occurrence of the reported accident or situation, whether intentionally or otherwise, the University may take disciplinary actions against SP Participants in accordance with their internal regulations.</p>	<p>after the resolution of each accident or situation.</p> <p>7. Policy on Misconduct 7-1. Participants shall behave properly, act and speak responsibly and honestly, recognizing that their words and actions represent the University and KOICA as well as the country of their origin. 7-2. Participants shall refrain from accessing inappropriate establishments that could impair their dignity.</p> <p>8. Discriminatory Actions and Sexual Harassment 8-1. Participants shall complete mandatory courses designed to prevent discrimination and sexual harassment provided by KOICA and the university and shall act accordingly. 8-2. Participants shall not engage in any aggressive or insulting behaviors or use of words of discrimination against gender, religion, disabilities, age, nationality, physical appearances, marital status, family status, ethnicity, political opinion or sexual orientation. 8-3. Participants shall not engage in any sexual harassment (including sexually oriented jokes or remarks, unwelcome gestures for college, unwelcome sexual advances, requests for sexual favors, and other verbal or physical harassment of a sexual nature). 8-4. Participants shall be cognizant of the fact that sexual harassment herein is defined in accordance with international norms and standards. It is to be noted that sexual harassment shall be judged and determined on the basis of context and feelings of victims, not the intent of the offender. 8-5. Participants shall also acknowledge that both discriminatory actions or sexual harassment shall not only be regarded as cause for disciplinary actions including dismissal from the SP, according to rules and regulations, but also be subject to legal actions under the Korean law. 8-6. It is strongly recommended that participants who feel victim of or witness to any act of discrimination or sexual harassment must immediately report the case to the university and seek assistance.</p> <p>9. Prohibition of Political Activity Participants shall not take part in any political activity, such as supporting a certain political group or getting involved in any political movements.</p> <p>10. Compliance with the Regulations of the University and KOICA 10-1. Participants shall fully comply with the academic regulations of the university and guideline of KOICA. 10-2. If a participant violates any of the regulation of the university or KOICA, he or she shall be subject to disciplinary measures, as stipulated in such regulation, can be enforced.</p>

Formato de Aplicación de KOICA

KOICA-CIAT
Website: <http://www.koica.or.kr> / Email: info@koica.or.kr
 101 Seongyeon-gu, **Seoul**, **South Korea** (Seoul 04511, Korea)

DECLARATION

I, _____, of _____, do hereby declare that the statements I made in this form are true and correct to the best of my knowledge.
 If accepted for the program, I agree to respect SP Participant Guidelines and Code of Conduct set forth above.
 I will comply with the terms and conditions of KOICA Scholarship Program.
 I will accept any penalties and consequences including dismissal from the Program
 and report to my supervisor if under employer.

Date: _____ Applicant's Name: _____ Signature: _____

KOICA-CIAT
Website: <http://www.koica.or.kr> / Email: info@koica.or.kr
 101 Seongyeon-gu, **Seoul**, **South Korea** (Seoul 04511, Korea)

PART 3. MEDICAL HISTORY QUESTIONNAIRE
MEDICAL HISTORY QUESTIONNAIRE (to be completed by the applicant)

1. Present Status

a. Do you currently use any drugs for the treatment of a medical condition? (give name & dosage)

Present	<input type="checkbox"/> No	<input type="checkbox"/> Yes	Name of Medication ()	Dosage ()
---------	-----------------------------	------------------------------	------------------------	------------

b. Are you pregnant? (females only)

Present	<input type="checkbox"/> No	<input type="checkbox"/> Yes	months ()
---------	-----------------------------	------------------------------	------------

c. Please indicate any needs arising from disabilities that may require additional support or facilities.

Present	<input type="checkbox"/> No	<input type="checkbox"/> Yes	Specify ()
---------	-----------------------------	------------------------------	-------------

Note: (Disability does not lead to dismissal or exclusion from the Program. However, alert the situation, you may be already required by the KOICA Program Manager for more detailed account of your condition.)

2. Medical History

a. Have you had any significant or serious illnesses? (if hospitalized, give place & dates)

Present	<input type="checkbox"/> No	<input type="checkbox"/> Yes	Name of Illness ()	Place & dates ()
Present	<input type="checkbox"/> No	<input type="checkbox"/> Yes	Present condition ()	

b. Have you ever been a patient in a mental hospital or have been treated by a psychiatrist?

Present	<input type="checkbox"/> No	<input type="checkbox"/> Yes	Name of Illness ()	Place & dates ()
Present	<input type="checkbox"/> No	<input type="checkbox"/> Yes	Present condition ()	

c. High blood pressure

Present	<input type="checkbox"/> No	<input type="checkbox"/> Yes			
Present	<input type="checkbox"/> No	<input type="checkbox"/> Yes	Present condition ()	Medication ()	Dosage ()
			Are you taking any medicine? <input type="checkbox"/> No <input type="checkbox"/> Yes		

d. Diabetes (sugar in the urine)

Present	<input type="checkbox"/> No	<input type="checkbox"/> Yes		
Present	<input type="checkbox"/> No	<input type="checkbox"/> Yes	Present condition ()	
			Are you taking any medicine or insulin? <input type="checkbox"/> No <input type="checkbox"/> Yes	

3. What illnesses have you had previously?

<input type="checkbox"/> Throat Illness	<input type="checkbox"/> Liver Disease	<input type="checkbox"/> Heart Disease	<input type="checkbox"/> Kidney Disease
<input type="checkbox"/> Tuberculosis	<input type="checkbox"/> Asthma	<input type="checkbox"/> Stomach and Intestinal Disorder	
<input type="checkbox"/> Infectious Disease	<input type="checkbox"/> Specify the name of illness ()		
<input type="checkbox"/> Others	<input type="checkbox"/> Specify ()		

4. Has the above illnesses been cured?

<input type="checkbox"/> Yes	<input type="checkbox"/> No
	<input type="checkbox"/> Specify the name of illness ()
	<input type="checkbox"/> Present condition ()

➔ Lleno de manera honesta por el aplicante

Lo llena y firma la máxima autoridad o el jefe directo del aplicante a la beca.

IMPORTANTE
Poner el sello
de la institución

Resumen

- Convocatoria 2026:

- 5 programas de maestrías (**75 cupos disponibles / 10 para Ecuador**).

- Proceso:

- (1) Aplicación (**15/Dic/2025**)

- 1. *Formulario de aplicación de KOICA,*
 - 2. *Copia del pasaporte vigente,*
 - 3. *Una vez que todos los documentos estén completos y tengan las firmas respectivas, escanee la aplicación completa y remítala a jpinto.koica@gmail.com*

- (2) Entrevista (KOICA Ecuador),

- (3) Revisión de aplicación por parte de las universidades,

- (4) Evaluación médica,

- (5) Entrevista (Universidades Coreanas),

- (6) Preparación para el viaje (Visa / Orientación de viaje),

- (7) Inicio del Programa (Agosto).

Parte 4.

Preguntas & Respuestas

FAQ's

FAQ's

1. ¿Quiénes pueden aplicar a los Programas de Becas de Maestría ofrecidos por KOICA?
2. ¿Es posible aplicar si un servidor público no cuenta con nombramiento definitivo o es de libre remoción?
3. ¿La beca tiene cobertura para la familia?
4. ¿Se puede aplicar a dos o más maestrías?
5. ¿Dónde puedo apostillar los documentos o puedo únicamente notarizar?
6. ¿Es necesario regresar y devengar la beca?
7. ¿Los títulos son reconocidos por SENESCYT?
8. ¿Es necesario presentar el certificado TOEFL o IELTS para postular a las becas?
9. ¿En qué idioma se deben remitir los documentos que son parte de la postulación?
10. ¿Puedo, personalmente, realizar la traducción de los documentos que son parte de la postulación (título de tercer nivel, notas, etc.)?
11. ¿Si ya tengo título de maestría, puedo aplicar?
12. ¿Llevo poco tiempo trabajando en una institución pública, puedo aplicar?
13. ¿Con quién puedo contactarme en el caso de tener más preguntas?

GRACIAS

PROGRAMA DE BECAS DE
MAESTRÍA – KOICA 2026

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