

Consent to collection, use, and processing of personal information and Identifiers

Consent to collection and use of personal information	Consent to processing of personal identifiers
<p>In accordance with Article 15 (2) of the Personal Information Protection Act, we inform you of the following matters to obtain your consent for the collection and use of your personal information:</p> <ul style="list-style-type: none"> ◇ Purpose of collection/use <ul style="list-style-type: none"> - personal identification and evaluation of an applicant ◇ Items to be collected/used <ul style="list-style-type: none"> - Name, picture, educational background, work experiences, address, contact details, licenses, resident registration no., etc ◇ Retention/Use period <ul style="list-style-type: none"> - In accordance with the retention period of related documents as required by relevant laws and regulations 	<p>In accordance with Article 24 (1), of the Personal Information Protection Act, we inform you of the following matters to obtain your consent for the processing of your personal identifiers:</p> <ul style="list-style-type: none"> ◇ Personal identifier to be processed <ul style="list-style-type: none"> - Foreigner registration no. and passport no. ◇ Retention/Use period <ul style="list-style-type: none"> - As stated in the column to the left
<p>◇ Right to refuse to agree & disadvantage upon any refusal to agree</p> <p>You have the right to refuse consent for the collection, use, and processing of your personal information and identifiers. However, please note that without this consent, we will be unable to consider your application during the hiring process or make a decision regarding your employment.</p>	
<p>Do you agree to the collection and use of your personal information?</p> <p><input type="checkbox"/> I agree.</p> <p><input type="checkbox"/> I do not agree.</p> <p style="text-align: right;">Date: 20 . .</p> <p>Name: (Signature)</p>	<p>Do you agree to the processing of your personal identifiers?</p> <p><input type="checkbox"/> I agree.</p> <p><input type="checkbox"/> I do not agree.</p> <p style="text-align: right;">Date: 20 . .</p> <p>Name: (Signature)</p>