

Processing of Personal Information Consent Form (For Employees)

Organization		Name		Date of Birth	
---------------------	--	-------------	--	----------------------	--

1. I hereby acknowledge that I, as an employee of **AAA** Corp (hereafter "the company") understand need to provide personal information for the purpose of human resource management, and consent to the collection and use of general personal (credit) information by the company in accordance with "Personal Information Protection Act" and other relevant laws and regulations.

Type	Personal Information	Purposes	Retention
All	A. Personally Identifiable Information: Photo, Name (Korean, Chinese Character and English), Birthday, Gender, Address, Contact Info, e-mail address, ID, and employment code, Finger Print B. Education: school, education years, major, GPA, and graduation C. Career Info : working years, organization, positions and/or titles, and responsibilities D. Family: family members, names, age, education, job, names of companies where family members are employed, titles/positions, residential location E. Military service info: type, service branch, rank, discharge, years in service, justification if not fulfilled, veteran information F. Certificates: licenses (acquisition date, type), languages (name of language ability test, score) G. Credit transaction and credit history H. Others: housing info, asset , marital status, payroll information, banking info for payroll, loan information, license plate number, information for internal system access, access card information, qualified for national patriots, donation information	A. Hiring B. To fulfill company' s legal obligation in accordance with income tax law, labor law, social security law and other relevant laws C. To process HR related issues such as transfer, reward and punishment, major employment conditions, salary, welfare program and others D. Groupware e-mail account, access card, family events, corporate card issuance, regular health check, loan, system access permissions, training and employment insurance	For period stipulated by each relevant laws and regulations after retirement
	Personal video information	A. Prevention of crimes and facilities safety B. Fire Prevention C. Vehicle theft and damage prevention	90 days after the collection
I confirm that I have the right to disagree with the above terms and to demand that my personal information not be collected or used and acknowledge that such may result in work delays and disadvantages in recruitment and HR transfer.			

Do you agree with the collection and use of general personal (credit) information?

(☐ I agree ☐ I do not agree)

2. I hereby consent to the collection and use of sensitive and unique identifiable information defined in the table below by the company.

Type	Sensitive Information	Purposes	Retention
All	A. Physical Disability B. Medical history (medical diagnosis certificate, doctor written opinion)	A. Preferential treatment for hiring and government support for hiring B. transfer, work competency assessment, and other human resource management C. Claim for damage D. Access and attendance management	For period stipulated by each relevant laws and regulations after retirement
I confirm that I have the right to disagree with the above terms and to demand that my personal information not be collected or used and acknowledge that such may result in work delays and disadvantages in recruitment and HR transfer.			

Do you agree with the collection and use of sensitive information? (☐ I agree ☐ I do not agree)

Type	Unique Identifiable Information	Purposes	Retention
All	A. Resident Registration Number (Alien Registration Number) B. Passport number (for foreign workers and employees on business travel)	A. Personal identification B. Air ticket for business travel and Visa issuance C. Social insurance, tax, visa issuance/renewal for non-Korean employees required by relevant laws D. To fulfill company's legal obligation in accordance with income tax law, labor law, social safety insurance law and other relevant laws E. For company insurance and Employment Insurance coverage	For period stipulated by each relevant laws and regulations after retirement
I confirm that I have the right to disagree with the above terms and to demand that my personal information not be collected or used and acknowledge that such may result in work delays and disadvantages in recruitment and HR transfer.			

Do you agree with the collection and use of unique identification information? (☐ I agree ☐ I do not agree)

3. I consent to the company's retention of personal information (name, employment ID number, position, working years and others) for 10 years after my retirement for the purpose of career certificate issuance.

(Optional) Do you agree with the above? (☐ I agree ☐ I do not agree)

4. The company can retain employee's personal information for 5 years after the retirement in accordance with Article 140 of Income Tax Act and Article 85-3 of Framework Act on National Taxes. And the company hold the employment contract information and the personal information created by the employees during his/her performance of duty (i.e. access card information, work assignment information, company event and PR data, and others) up to 3 years for the purpose of career (retirement) certificate in accordance with Article 42 of Labor Standards Act if employee does not agree to the above Clause 3.

5. I acknowledge that the copy of the agreement that I have signed is equally effective as the original copy to ensure the convenience of collecting diverse data.

Date:

Name: (Sign)

Attn: AAA Company