Example

2020 Application form for the Research Proposal for the Beamline for Supramolecular Crystallography (Institute for Protein Research, Osaka University)

Applicant								Date (Month/Day/Year)	
					Middle nam	e: 🗆 🗆			
Po	osition: Profess	or *P	lease sign.					November/15/2019	
Signature *Please fill in the date that you make this application for									
Affili	ation								
Department of Chemistry, ���University									
Address									
3-2 Yamadaoka, Suita-city, Osaka 565-0781, JAPAN									
Tel. E-mail								1 '	
+81-6-6879-4323 +81-6-6879-8590 tanpakuken-kyoten@office.osaka-u.ac.jp Title of the									
Experiment									
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r	Family Name	+ First Name	(+ Middle Nan	ne)					
S									
Abstract (Describe the significance, purpose, features and expected results of the proposed research, including the reason									
why this beamline is needed for your research)									
*There is no limit of the number of the characters. If this column is not enough,									
please add it.									
*Please fill it out appropriately.									
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Name of proteins, Hazards, Safety measures Requested Beamtime (number of shifts, date etc.)									
Bacterial and plant bete-glucosidases, No-Hazard, No-Safety concern						2 shifts, September 2020			
A Director of affiliated Institution permits the applicant to apply for the beamtime proposal Name: Title:									
Signature									
							Date:		

^{*}Please feel free to ask us if you have any questions.

Project Team of Joint Usage/Research Center, IPR, Osaka University
E-mail: tanpakuken-kyoten@office.osaka-u.ac.jp