Example 2023 APPLICATION FORM For International Collaborative Research with IPR, Osaka University

(1) APPLICANT

Family Name	00000	Given Name(s)	00000)				
Nationality	••••	Country of Residency						
Degree	PhD	•	•					
Date of Birth	Day 3 Month April Year	1972 N	ale/Female	Male				
Affiliation	Department of Chemistry, $\triangle \triangle \triangle$ University							
Job Title	Professor	Professor						
Postal Address	3-2 Yamadaoka, Suita-city, Osaka 565-0871, JAPAN							
TEL	+81-6-6879-4323							
FAX	+81-6-6879-8590							
E-mail	tanpakuken-kyoten@office.osaka-u.ac.jp							

(2) Accompanying Researchers

*When researchers other than the applicant will also come to IPR, provide their information below .

Accompanying researcher 1

Family Name		Given Name(s)]		
Nationality	••••	Country of Residency				
Degree	Bachelor's degree					
Date of Birth	Day 10 Month September Ye	ear 1992 M	ale/Female	Female		
Affiliation	Department of Engineering, ���University					
Job Title	Graduate Student					
Postal Address	3-2 Yamadaoka, Suita-city, Osaka 565-0871, JAPAN					
TEL	+81-6-6879-4323					
FAX	+81-6-6879-8590					
E-mail	tanpakuken-shien@office.osaka-u.ac.jp					

Accompanying researcher 2

Family Name		Given Name(s)]			
Nationality	••••	Country of Residency					
Degree	Bachelor's degree						
Date of Birth	Day 10 Month September Ye	ear 1992 Ma	ale/Female	Female			
Affiliation	Department of Engineering, ���University						
Job Title	Graduate Student						
Postal Address	3-2 Yamadaoka, Suita-city, Osaka 565-0871, JAPAN						
TEL	+81-6-6879-4323						
FAX	+81-6-6879-8590						
E-mail	tanpakuken-shien@office.osaka-u.ac.jp						

Accompanying researcher 3

Family Name		Given Name(s)]			
Nationality	••••	Country of Residency					
Degree	Bachelor's degree						
Date of Birth	Day 10 Month September Ye	ear 1992 M	ale/Female	Female			
Affiliation	Department of Engineering, ���University						
Job Title	Graduate Student	Graduate Student					
Postal Address	3-2 Yamadaoka, Suita-city, Osaka 565-0871, JAPAN						
TEL	+81-6-6879-4323						
FAX	+81-6-6879-8590						
E-mail	tanpakuken-shien@office.osaka-u.ac.jp						

*Delete/add columns depending on the number of accompanying researchers.

(3) Period

Proposed Date of Arrival at IPR	Day	15	Month	September	Year	2023
Proposed Date of Departure from IPR	Day	5	Month	October	Year	2023
Duration		21	da	ys		

(4) Research Title

(5) Continuation

*()If this is a continuation of your research application that had been awarded before, please add a check in the parenthesis to the side and provide details of your progress

The title of your previous research plan(s):

The period of your previous research:

(6) Research Plan (no more than 2 pages)

Background:

Amyloid fibril formation is considered as a critical event that leads to the pathogenesis of Alzheimer's disease in brains and

Specific aims:

- 1. To elucidate molecular mechanism of ... by applying
- 2. To identify amino acid residues implicated in ... by using solution NMR.
- 3. To determine 3D structure of by X-ray crystallography.

Methods:

Role(s) of the host researcher at IPR:

••••••

Expected scientific outcome:

Research plan (continued)

(7) Research Collaborator at IPR, Osaka University

Host PI	000 000
Professor	
Collaborator (title)	OOO (Assistant Professor)
Recommendation	*Must be filled by a Researcher at Institute of Protein Research, Osaka University.
Date	Day Month Year

(8	3)	Curriculum	Vitae of App	icant (Starting from the last education	on to the present affiliation)
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Education:
B.S in Chemistry OOUniversity 1990, March
PhD. Chemistry $\triangle \triangle$ University 1996, March
Employment History:
Professor, OOUniversity 2003, October - Present
Associate Professor, \bigcirc University 1996, April – 2003, September
Publications:
Grant:
Awards:

(9) Curriculum Vitae of Other Researchers (Starting from the last education to the present affiliation) Accompanying researcher 1

Education:
B.S in Chemistry OOUniversity 1990, March
Publications:
Grant:
Awards:

* Delete/add columns depending on the number of accompanying researchers.

(10) List of publications relevant to the proposed research

*Please include "title", "authors", "Journal name", "volume", "page numbers" and "the year of publication".

* Expand the column height when necessary.

(11) The estimated costs for the travel expenses (coach class airfare) and accommodation fees. Please note that the amount of support will be determined based on the available fund.

Airfare Accommodation fees	1	(150,000JPY (10,000JPY		2 persons) 2 persons \times 3 nights)	
Total	360,000JPY				
* a. g. Airfara 150.000	IPV X 2 norse	ns Accommodat	ion fo	ees 10,000JPY × 2 persons × 3 nights,	Total 360,000JPY
etc.	511×2 perso	ns, Accommodat	.1011 10	\sim 10,00001 1 \sim 2 persons \sim 5 inglits,	10tai 500,00051 1

(12) Signatures

Applicant

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Signature	*Please sign by yourself.					
Date	Day	Month	Year			

Director of your affiliated institution

I permit the applicant and other researcher(s) to apply for the collaborative research.

*Please have it signed by the director of your affiliated institution.								
	Signature:							
Name								
Title								
Date	Day	Month	Year					

*If you have any question, feel free to contact us at

Project Team of Joint Usage / Research Center, IPR, Osaka University

E-mail: tanpakuken-kyoten@office.osaka-u.ac.jp