# **2024 APPLICATION FORM** For International Collaborative Research with IPR, Osaka University

## (1) APPLICANT

Family Name				Given Name(s)		
Nationality				Country of Residenc	e	
Degree						
Date of Birth	Day	Month	Year		Male/Female	
Affiliation						
Job Title						
Postal Address						
E-mail						
Phone						
Fax						

# (2) Period

Expected Date of Arrival at IPR	Day	Month	Year
Expected Date of Departure from IPR	Day	Month	Year
Duration		days	

# (3) 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 funds.

\* e. g. Airfare 150,000JPY × 2 persons, Accommodation fees 10,000JPY × 2 persons × 3 nights, Total 360,000JPY etc.

## (4) Research Collaborator at IPR, Osaka University

Host PI				
Professor				
Collaborator (title)				
Recommendation				
Date	Day	Month	Year	

# (5) 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 Residence		
Degree						
Date of Birth	Day	Month	Year		Male/Female	
Affiliation						
Job Title						
Postal Address						
E-mail						
Phone						
Fax						

#### Accompanying researcher 2

Family Name				Given Name(s)		
Nationality				Country of Residence	;	
Degree						
Date of Birth	Day	Month	Year		Male/Female	
Affiliation						
Job Title						
Postal Address						
E-mail						
Phone						
Fax						

#### Accompanying researcher 3

Family Name				Given Name(s)		
Nationality				Country of Residence	;	
Degree						
Date of Birth	Day	Month	Year		Male/Female	
Affiliation						
Job Title						
Postal Address						
E-mail						
Phone						
Fax						

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

## (6) Research Title

## (7) Continuation

\*( ) If this is a continuation of a previously awarded research proposal, please indicate by checking the brackets below and providing detailed progress.

The title of your previous research plan(s):

The period of your previous research:

# (8) Research Plan (no more than 2 pages)

Background:
Specific aims:
Methods:
Role(s) of the host researcher at IPR:
Expected scientific outcome:

Research plan (continued)

## (9) Curriculum Vitae of Applicant (Starting from the last education to the present affiliation)

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

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

## (11) List of publications relevant to the proposed research

\* Expand the column height when necessary.

# (12) Signatures Applicant

Signature			
Date	Day	Month	Year

## Director of your affiliated institution

I permit	I permit the applicant and other researcher(s) to apply for the collaborative research.						
			Signature:				
Name							
Title							
Date	Day	Month	Year				

\*If you have any questions, please 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