2024 Application Form for the Research Proposal

for the Microcrystal Electron Diffraction (MicroED)

(Institute for Protein Research, Osaka University)

|  |  |
| --- | --- |
| Applicant Family Name: First Name: Middle name: Position: | Date (Month/Day/Year) |
| Signature |
| Affiliation　 |
| Address |
| Tel. | Fax. | E-mail  |
| Title of the Experiment |  |
| Members | Name | Date of BirthGender | Affiliation | Position | E-mail |
| (including the applicant) |  |  |  |  |
| Abstract (Describe the significance, purpose, features and expected results of the proposed research, including the reason why this MicroED measurement is needed for your research) \*(　)If this is a continuation of a previously awarded research proposal, please indicate by checking the brackets below and providing detailed progress.[Research Progress]  |
| Name of samples, hazards, safety measures \*(　) Please check here if the preliminary XRD data are available. | Requested Machine time (date etc.) |
| Deposition of obtained diffraction data/coordinates to the public archives  YES or NO (reason why if selected “NO” ) |
| As the Director of this applicant’s institute, I hereby permit him/her to submit this application document. Name: Title: Signature  Date: |