【Confidentiality 2】

　　　　　　　　　　　　　　　　　　　　　　　　　　　　　 [Day] [Month], [Year]

To the President of The University of Osaka

[Address]

[Name of Institution]

[Post] and [Name]

# **Sponsored research application form**

We apply for sponsored research after observing the National Universities corporation The University of Osaka sponsored research regulations as follows.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 1. Research Title |  | | | | |
| 1. Purpose and Details of Research | objectives：  contents： | | | | |
| 1. Research Period | from to | | | | |
| 1. Provided from Institution \* If any, |  | | | | |
| 1. Place for Performance of Research |  | | | | |
| 1. Essential Research Expenses | Direct Expenses | | Academic Contribution Fee | Indirect Research Expenses | Total |
| JPY | | JPY | JPY | JPY |
|  | Check the left box if direct expense includes Research Participants’ 　salary. In this case, please fill out the separate PI Labor Cost Calculation Sheet and submit it along with this form. | | | |
| 1. Researcher in charge at The University of Osaka (Department, Position, and Name) |  | | | | |
| 1. Contact Person | Dept.,Name：  Mailing Address: Tel： E-mail： | | | | |
| 1. Signing Method |  | Electronic Signature  \*If your institution could pay charge for electronic signature of DocuSign or Adobe Acrobat Sign, we'll accept the e-signature system. Otherwise, we can't. | | | |
|  | Wet Signature (Sending the original contract by post) | | | |
|  | Wet Signature (Exchange of PDF data by e-mail) | | | |
| 1. Signer of contract   \*Not mandatory | Name of signer  Title of signer | | | | |
| 1. Others \* If any, |  | | | | |

大阪大学記入欄

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| --- | --- | --- | --- | --- | --- | --- | --- |
| 部局承認(予定)年月日 |  | | | | | | |
| 部局連絡担当者 | 所属 |  | 氏名 |  | | TEL | 吹田171- |
| 付随データの有無 | 契約書 |  | 理由書 |  | R | その他 |  |
| 部局担当者自由記載欄 |  | | | | | | |