(Please check this box if this proposal is for an international collaboration.)

Form 2 2-1

|  |  |
| --- | --- |
| \* Date received |  |
| \* Receipt No. |  |
| \* Category No. |  |

Institute for Chemical Research International Joint Usage/Research 2025  
Proposal Application Form for Proposal-based Research

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Principal Investigator | | Name: | |  | | | | | | | | | | | | | | | | | |
| Affiliation (institution, department, and title): | | | | | | | | | | | |  | | | | | | | |
| Remarks: | | | | 35 years old and under | | | | | | | | within 10 years of receiving a degree | | | | | | | |
|  | | | | under the age of 40 | | | | | | | |  | | | | | | | |
| Address: | | | |  | | | | | | | | | | | | | | | |
| Phone, Fax: | | | | | |  | | | | | | | | | Email: | |  | | |
| New　　 Continued | | | | | | | | | | | | Approval for Security Export Control\* | | | | | | | | | |
| Research Project Title: | | | | | | | | | | | | | | | | | | | | | |
| (Japanese) |  | | | | | | | | | | | | | | | | | | | | |
| (English) |  | | | | | | | | | | | | | | | | | | | | |
| Type of Research Project (Please circle one.)  Exploratory Research Advanced Research | | | | | | | | | | | | | | | | | | | | | |
| ICR Partner Researcher | | | | | Name: | | | | |  | | | | | | | | | | | |
| Laboratory: | | | | |  | | | | | | | | | | | |
| Phone: | | | |  | | | | | | Email: | | |  | | | |
| Research Team  (Please specify Principal investigator, ICR partner researcher, or Collaborating researcher in the *Assigned Role* column below.) | | | | | | | | | | | | | | | | | | | | | |
| Name | | | Affiliation | | | | | | | | Position  (Grade for graduate student) | | | | | Assigned Role  /Research task | | | | | Length of Stay at ICR (Days) |
|  | | |  | | | | | | | |  | | | | |  | | | | |  |
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|  | | |  | | | | | | | |  | | | | |  | | | | |  |
| Research budget (Details should be mentioned on the section of *List of Expenses*.) | | | | | | | | | | | | | | | | | | | | | |
| Equipment purchase  　　　　　　×1,000 yen | | | | | | | Consumables  　　　　　　×1,000 yen | | | | | | Travel expenses  　　　　　　　×1,000 yen | | | | | | | Total  　　　　　　　×1,000 yen | |

＊for internal use

Form 2 2-2

|  |
| --- |
| Research Purpose (Please describe the reasons to choose ICR for your joint research, as well.) |
| Detailed Research Plan (Please specify each assigned task of the principal investigator, ICR partner researcher, and collaborating researcher, as well.) |
| Expected Outcome and Impact |
| Additional Information helpful for project evaluation (Please describe publications of past joint-research outcomes, if any.) |
| Other Requirements (Please indicate any requests to use specific facilities, equipment, or resources, as well.) |

Form 2 2-3

|  |  |  |
| --- | --- | --- |
| List of Expenses (Purchased equipment will be managed by ICR after your research project is completed.) | | |
| Research equipment purchase  (×1,000 yen) | Consumables (including use charges of Supercomputer)  (×1,000 yen) | Travel expenses  (×1,000 yen) |
|  |  |  |
| **Total** | **Total** | **Total** |