Type J: Form 1

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| **東北大学金属材料研究所国際共同研究センター共同研究申請書**  Application form of integrated project of ICC-IMR | | | | | |
| 申請番号(Proposal number) (事務記入:To be filled by the office) | | | | | |
| 1. 申請日: Application date | | | | | |
| Year Month Date | | | | | |
| 2. 申請者氏名: Full name of the main investigator | | | | | |
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| 3. 所属機関: Affiliation | | | | | |
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| 4. 職: Position | | | | | |
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| 5. 住所: Address of affiliation | | | | | |
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| 6. 電子メール: e-mail | | | | | |
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| 7. 電話: Tel.(Include country code) | | | | | |
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| 8. Fax: Fax.(Include country code) | | | | | |
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| 9. 種別: Type of application | | | | | |
| プロジェクト(Integrated project) | | | | | |
| 10. 課題名: Title of application | | | | | |
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| 11. 分担者: List of investigators (Add rows, if necessary)  国内研究者は採択後共同利用研究者として登録される必要があります:Domestic researchers should to be registered as IMR collaboration program user, if a proposal is accepted.  国外研究者は履歴書添付のこと: Attach short C.V.: Form 3 or equivalent for foreign investigators | | | | | |
| 氏名  Full name | 所属  Affiliation | 職  Position | | 分担  Role | |
|  |  |  | | The Main IMR Collaborator or Co-PI | |
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| 12. 継続の場合以前の申請課題番号: Previous application numbers, if any | | | | | |
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| 13. 金属材料研究所の受け入れ教員: Representative/responsible person in IMR division/laboratory | | | | | |
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| 14. 利用施設: If you use the following research center, leave items you are going to use. | | | | | |
| International Research Center for Nuclear Materials Research  Cooperative Research and Development Center for Advanced Materials  High Field Laboratory for Superconducting Material  Center for Computational Materials Science  If you have accepted/submitted proposals above, please write proposal No. and short summary in below. | | | | | |
| 15. 研究経過: Present research related to this research plan | | | | | |
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| 16. 研究の目的: Purpose of proposed research | | | | | |
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| 17. 研究計画: Proposed plan | | | | | |
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| 18.　国内の他機関での共同研究の有無：Other Related Research Collaboration in Japan | | | | | |
| If you have a plan to visit and/or perform related collaboration research in other organization during this visit, please write below about the relation to this proposal and the necessity. In addition, if one of your domestic collaborator has a domestic inter-university collaboration proposal submitted/accepted at IMR, please write the proposal No. | | | | | |
| 19.　国外での共同研究実施計画の有無：Plan of collaboration experiment/visit of Japanese collaborator to your home institute or related organization. | | | | | |
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| 20. 期待される成果と重要性：Expected results and impacts | | | | | | |
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| 21. 必要経費: Estimate of Expenses (Add rows, if necessary) | | | | | | |
| **Financial Year 2025 旅費　Travel Expenses** | | | | | | |
| 名前  Name | 滞在予定期間  Period of Stay | | 訪問予定時期  Visit month/year | | 旅費  Expected expenses(JPY) | |
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| **Financial Year 2025 その他　Other (Consumption, Instrument etc.)** | | | | | | |
| 項目  Item | | | 数量  Number/Amount | | 費用  Expenses (JPY) | |
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| **小計A: Subtotal A of Financial Year 2025(04/2025-03/2026)** | | | | | **A=** | |
| **Financial Year 2026 旅費　Travel Expenses** | | | | | | |
| 名前  Name | 滞在予定期間  Period of Stay | | 訪問予定時期  Visit month/year | | 旅費  Expected expenses(JPY) | |
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| **Financial Year 2025 その他　Other (Consumption, Instrument etc.)** | | | | | | |
| 項目  Item | | | 数量  Number/Amount | | 費用  Expenses (JPY) | |
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| **小計B: Subtotal A of Financial Year 2026(04/2026-03/2027)** | | | | | **B=** | |
| **合計C: Total A+B (FY2025+FY2026)** | | | | | **C: A+B=** | |