Number	
Date Received	

## APPLICATION FORM FOR INTERNATIONAL JOINT USAGE/RESEARCH PROGRAM AT MRL SCIENCE TOKYO FY2025

1. Title of Project					
2. Project Purpose					
3. Form of Collaboration					
*Choose one from the following forms					
a) Visiting MRL and conduct proposed project using	ng our	facilities			
b) Performing proposed project through host investigator using bio-resources deposited in MRL					
c) Performing proposed project through host investigator using database deposited in MRL as a limited use					
4. Applicant Information					
Name (Last, first, middle)	Natio	onality			
Degree	Posit	ion Title			
Applicant Organization	l				
Name					
Address					
Mailing Address (Street, city, state, zip code)					
, , , , , , , , , , , , , , , , , , ,					
Tel:	FAX:				
E-Mail address:	l .				
Applicant Signature		Date:			
Approxim digitation					
5. Dates of proposed period of support (month, day, year)					

From			Tl	hrough			
July 1, 2025			M	March 31, 2026			
6. Host investigator in MRL							
Signature		Date					
7. Project members	S						
Name		Institution/Departmen	ıt	Position Title	Role		
8.Estimated Costs							
	up to :	500,000 JPY maximum					
	T	Deta					
G 1:	TDV/						
Supplies	JPY:						
		Deta	ils:				
Travel Costs	JPY:						
9. Research Plan	Inchi	de current status of co	ODE	ration with MRL resea	rchers and compliance with laws		
					rights will be described.)		
S							

10. Expected results and significance of the joint research				
11. Facilities to be used in MRL				