

**RIHN VISITING RESEARCH FELLOWS APPLICATION FORM**

**Please attach your CV.**

**1. Full name:**

(in your language)                      (surname)                      (first)                      (middle)

**2. Full name:**

(in English)                      (surname)                      (first)                      (middle)

**3. Date of birth:**

year/ month/ day

**4. Age/Gender:** /

(As of April 1st, 2017)

**5. Nationality:**

**6. First language:**

**7. Other languages spoken:**

**8. Mailing address:**

Must be valid as of Feb. 2017

\*Please write clearly and accurately as this is the address to which we will send the selection results.

E-mail:

Tel:

Fax:

**9. Home Address:**

← Check here if the same as the above mailing address.

E-mail:

Tel:

Fax:

**10. Name of organization/affiliation**

**and present title/position:**

**11. Office Address:**

E-mail:

Tel:

Fax:

**12. Fields of Expertise:**



**14. Plan for the research to be undertaken at RIHN.**

**Topic Title:**

**Description in detail (Research questions of proposed research, research plan, expected results and their possible impact):**

Please describe in up to 1000 words.

\*You cannot change the title and plan described here after selection.

\*If you are not comfortable with communicating in Japanese or English during your stay at RIHN, please state clearly in this application.

**15. Proposed host researcher and reason for this choice**

**Name of host researcher:**

**Reason:**

**16. Please describe your academic relationship with the proposed host researcher and the status of communication established so far.**

**17. Proposed Length of Stay at RIHN**

\*The research period should be within the fiscal year (FY) 2017 (1 April, 2017 - 31 March, 2018), and from 2 months to 1 year in duration.

From to Month(s)  
(year/month/day) (year/month/day)

**18. If you have applied to the RIHN's Visiting Research Fellow scheme before, please list the year(s) of visit, host researcher, and result of selection.**

Year of Visit:      Host Researcher:                      Result of Selection:

- 1.
- 2.
- 3.
- 4.
- 5.

*I certify that the above information is true and correct to the best of my knowledge.*

*Date*                      /                      /  
(day/month/year)

*Signature*