Application Form for 2022 Incubation Study (IS)			
			Date:
To the Director	r-General of the Research Institute for	or Humanity and Nature (R)	(HN)
	Information about the app	plicant (project representati	ve)
	Name of applicant's institution:		
	Applicant's position:		
	Applicant's name:	Name in block letters	Signature
	Applicant's e-mail:		
Project Title			
Research plan	See Form 1-2 (Research Project Incuba	ation Study Proposal)	
Academic record	See Curriculum Vitae of Applicant		
	Certificate of	Authorization	
	t my consent for the above applicant to solution soluti		
Submitting Doct research represe	have confirmed that 1) the applicant me uments/ 4. Eligibility, 2) the applicant ha ntative will be conducted by the RIHN H d, if required according to the guidelines es.	as agreed that a personnel asse Personnel Committee after tra	essment examination as a nsition to feasibility study
Date:			

Name in block letters:

Signature*

Position of the Head of the Institution:

* We will also accept the signature of a subordinate of the person named above, provided he/she has the necessary authorization.