**Application form for FY2025 J-GlycoNet**

**Joint Research Program (Normal Type)**

Data: month/day/year

To J-GlycoNet Director

Applicant ：

Affiliation / Title ：

E-mail ：

I would like to submit the application form of "Joint Research Program (Normal Type)" as follows.

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Name of Host Researcher** |  | | | | | | | Consent obtained from host researcher | | Yes | |
| **Features**  **(check if applicable in this proposal)**  “Young Researcher” is less than 8 years after Ph.D. acquisition. | Interdisciplinary research | | Applicable indicate areas (ex. Glycobiology and Physics） | | | | | | | | |
| Applicant | | | Participant Researchers | | | | | | | |
| Female Applicant | Young Applicant | | Female  Researcher | | Young Researcher | Student | | | | |
| Undergraduate | | Master | | Doctoral |
|  |  | |  | |  |  | |  | |  |
| **Project Title** |  | | | | | | | | | | |
| **FY2025 Research expense** | Total budget (JPY)  （Max 200,000 JPY） | | | | Breakdown (JPY) | | | | | | |
| Travel Fee | | Expendable supplies, etc | | | | |
| **Implementation method** | Experiments performed by applicant visiting at J-GlycoNet institute  (number of visit： period： month/year ～ month/year）  Experiments performed by host researcher at J-GlycoNet institute (content： ) | | | | | | | | | | |
| **Experimental plan for visits to Japan**  We will support additional travel expenses in addition to the above research expenses.  （Max 200,000 JPY） | Experimental plans for visits to Japan by principal investigators and participants from overseas institutions　☐ Yes　☐ No  （If Yes）  　Name of visitor :  　Destination :　　　　　　　　　　Host Researcher :  　Planned period of visit : month/year (How many days)  Estimated travel expenses : 　　　　　　　JPY　（Max 200,000 JPY） | | | | | | | | | | |
| **A link of applicant’s publication list** | Ex. Google scholar、Scopus、Orcid | | | | | | | | | | |
| **Acknowledgements** | When presenting the results of this research or results derived from this research, please mention in the acknowledgments section of your paper that you have received support from J-GlycoNet.  　I agree | | | | | | | | | | |
| **Approval by applicant’s institution\*** | If selected for this research project, the applicant shall implement the contents of this proposal.  ☐ Approve（Signer name： title： ） | | | | | | | | | | |

\*Please check the box and Signature and title of the applicant's department head. Digital signature is also acceptable.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Research participants** | | | | | | | |
| Name | Affiliation | | Title | | Role in proposal | | |
| (Applicant) |  | |  | |  | | |
| (Host) |  | |  | |  | | |
| (Participant) |  | |  | |  | | |
|  |  | |  | |  | | |
| (Please add or delete as appropriate) |  | |  | |  | | |
|  |  | |  | |  | | |
| \* Please do not exceed 3 pages in length including the front page.  **[Research Objectives]**  **[Research Plan]**  ・Research Plan in FY2025  ・Significance of conducting research including originality, advance, and developmental potential, synergistic effects of combining with host researchers | | | | | | | |
| ------------------------------------------------------------ To be filled in by J-GlycoNet Office --------------------------------------------------------- | | | | | | | |
| 受理年月日 | 年 　月　 日 | 受理番号 | |  | | 採択番号 |  |