**Kyoto University Asian Studies Unit**

**KUASU Challenge+ Application Form**

1. Applicant details

|  |  |  |
| --- | --- | --- |
| Name  In Roman alphabet  (as shown on your passport): | Family name | Given name |
|  |  |
| Country of citizenship |  | |
| Date of birth | Year: Month: Day: 　　　(current age: ) | |
| Affiliation | Faculty or Graduate School:  Level: 　　 ☐Master’s year: ( 　 ) 　　　　　☐Doctoral year: ( 　 )  Student ID number:  Supervisor / Class instructor: | |
| Current address | 〒 | |
| Contact details | Phone number:  Email address (PC and Mobile Phone):  PC:  Mobile Phone:  Emergency contact:  Relation (ie. Father ): | |
| Passport details | Do you have a valid passport?  □Yes　　　　　□No  □Now under applying  (When will you receive your new passport? (mm/dd/yyyy) : / / )  Passport Number:  Expiry Date: | |

1. Other research grants

|  |  |
| --- | --- |
| Other research grants | Will you receive financial support from other organizations for this trip?  ☐Yes:　　　　　　　　　☐:No |
| If so, please provide the details:  Name of organization: |

1. Emergency contact / Guarantor details

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Guarantor /  Emergency contact | Name |  | Relationship to applicant |  |
| Address:  Phone number:  Cellphone (workplace contact, etc.):  E-mail: 　　　　　　　　　　　@ | | | |

1. Supervisor details

**\*Applicants should ask the supervisor to send an email to the IAO stating that they have approved the travel.**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Supervisor | Name |  | Job title |  |
| Affiliation | Graduate School of: | | |
| Contact | Email:　　　　　　　　　　　@  Phone number: | | |
| Relationship to applicant | ☐Direct supervisor 　　　 ☐Other: | | | |

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OFFICE USE ONLY 　　　申請受付日：　20　　　年　　　月　　　日

|  |  |  |  |
| --- | --- | --- | --- |
| 採択結果 | 選出　・　不選出 | 結果通知日 |  |
| 応募書類の確認 | □申請にあたっての抱負 | | |
| 派遣前提出物確認 | ☐大学加入の保険加入手続き（　　／　　）  ☐旅程表 | | |
| 派遣後提出物確認 | ☐乗車券のコピー　☐派遣報告書 | | |
| 特記事項 |  | | |