

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: <input type="checkbox"/> Master's year: () <input type="checkbox"/> 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? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Now under applying (When will you receive your new passport? (mm/dd/yyyy) : / /) Passport Number: _____ Expiry Date:	

2. Details for research activities

Duration (month/day/year)	/	/	—	/	/
Visiting sites and schedule	Date (month/day/year)	Destination and address			
	/ /				
	/ /				
	/ /				
	/ /				

3. Emergency contact / Guarantor details

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

4. Destination details

Host institution	Name of university / research institute: 1. 2. 3. Name of host division (faculty, graduate school, etc.): Field Research destination and address: 1. 2. 3.
------------------	--

5. 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	<input type="checkbox"/> Direct supervisor <input type="checkbox"/> Other:			

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	<input type="checkbox"/> 申請にあたっての抱負		
派遣前提出物確認	<input type="checkbox"/> 大学加入の保険加入手続き (/) <input type="checkbox"/> 旅程表		
派遣後提出物確認	<input type="checkbox"/> 乗車券のコピー <input type="checkbox"/> 派遣報告書		
特記事項			