**APPLICATION FORM**

**FY2020 Support for Female Researchers to Host Research Meeting (for the second term)**

*“The Initiative for the Implementation of the Diversity Research Environment (Traction Type)”*

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| RESEARCH MEETING TITLE　  |
|  |
| OVERVIEW OF RESEARCH MEETING　  |
|  |
| ORGANIZATION (team, laboratory, group, etc.,)　  |
|  |
| APPLICANT (Only female researchers)　  |
| Name |  |
| Affiliation and Job Title |  |
| Contact Details | Ext. #E-mail Address |
| CONTACT PERSON  |
| Name |  |
| Affiliation and Job Title |  |
| Contact Details | Ext. #E-mail Address |
| Assumed timing of workshops, etc. (Please describe as much as possible) |
|  |
| Assumed scope and number of attendees, such as the event |
|  |
| Keynote speakers or main lecturers candidate (if undecided, describe the assumed person)  |
|  |
| COVERED EXPENSES (Use, Amount) Please write down the estimated amount of this support. |
| Personnel Costs |  |
| Domestic travel expenses |  |
| Travel expenses for invited foreigners |  |
| Rewards |  |
| Printing costs |  |
| Outsourcing expenses |  |
| Supplies expense |  |
| Other things you would like to support (please check) |
|  | Installation of application forms |
|  | Lending of basic items necessary for the event |
|  | Printing with a large format printer |
|  | Support of the video distribution of the event |
| OTHER |
|  |