**Application Form for the Joint Use/Research for 2025 fiscal year of**

**the Joint Use/Research Center for “Planetary Materials Sciences”,**

**Institute for Planetary Materials (IPM), Okayama University**

Month　　 day, 　Year

|  |  |  |
| --- | --- | --- |
| Name | |  |
| Affiliated institution and department | |  |
| Position | |  |
| Supervisor | |  |
| Contact of affiliated institute | Address |  |
| Phone |  |
| E-mail |  |

**Principal applicant**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Application category |  | 1. International Joint Research |  | 2. General Joint Research |
|  | 3. Joint Use of Facility |  | 4. Workshop |

**Application category (Place a checkmark on the corresponding item)**

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| --- | --- | --- |
| Method of implementation |  | 1. Onsite (visit to IPM) |
| 2. Remote (no visit to IPM) | |
|  | 2-1 Request for IPM staff to perform experiment/analysis |
|  | 2-2 Remote access to IPM facilities |
|  | 2-3 Online workshop |
|  | 2-4 Others (please describe)  （　　　　　　　　　　　　　　　　　　　　　　　　　　　） |
|  | 3. Undetermined (If you cannot decide on the method of implementation, please tell us your current situation and your wish (e.g. how you wish to carry out the joint use/research under different possible circumstances).  (　　　　　　　　　　　　　　　　　　　　　　　　　　　　) |

**Method of implementation (Place a checkmark on the corresponding item)**

**Name of the research project**

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| Name of the research project | Japanese |  |
| English |  |

**New application or continued application (Place a checkmark on the corresponding item)**

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|  | New |  | Continued |

The CV and the publication list of the principle applicant must be attached if you submit new application.

**Name of the faculty member of IPM**

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| Name |  | Already consulted |  |

Must apply after consulting with a faculty member of IPM

**List of principle applicant and collaborators (A** **faculty member of IPM must be included as a collaborator for joint research.)**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | **Name** | **Affiliated institute** | **Position or school year** | **E-mail** | **Travel expense (required**  **or not) \*5** | **Early career\*6** |
|  | Full name in English |  |  |  |  |  |
| Full name in Chinese  characters, if available |
| 1 |  |  |  |  |  |  |
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| 5 |  |  |  |  |  |  |
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| 6 |  |  |  |  |  |  |
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| **Reasons you require support for travel expense\*5**  Example: I do not have external funding or other resources related to this research.  We lack of external funds or other resources related to this research because we use external funds for other expenses. | | | | | | |
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| **Preferred period of the research project (in case of onsite implementation)\*7,\*8** |
| From ( day/ month/ year) to ( day/ month/ year), ( ) days, ( ) persons |
| From ( day/ month/ year) to ( day/ month/ year), ( ) days, ( ) persons |
| From ( day/ month/ year) to ( day/ month/ year), ( ) days, ( ) persons |

\*1. Please write in the following order: 1；principal applicant, 2；faculty member of IPM 3 and later ; collaborator.

\*2. Please write in “Position or school year” and “Travel expense (required or not)” in case the name of the student is still unknown for reasons such as the assignment of the student will be decided later.

\*3. When an undergraduate/graduate student applies as a principal researcher, his/her supervisor must agree to and participate in the project as a collaborator.

\*4. When the project includes, as a collaborator, undergraduate/graduate student, whose academic supervisor is not on project, he/she must obtain permission from his/her supervisor. In this case, describe below the name and affiliation of the supervisor and indicate the supervisor’s consent was obtained.

( )

\*5. If you need support for travel expense, please provide specific reasons for your need

\*6. If you are an undergraduate/graduate student, or early career researcher less than 8 years after obtaining a doctoral degree as of April 1, 2025, please check the box.

\*7. Please write down if you are planning multiple visits

\*8. The number of visits, number of persons, and the duration that will be reimbursed may be limited depending on the budget.

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| **Reason for application and expected outcome**  (All applicants, new or continued, should explain the reason for application and expected outcome here. For application of a continued project, describe the progress of the project, including published article, conference presentation, award, or patent obtained so far. Also, describe the reason for continuing the project and the expected outcome). |
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| **Research Proposal**  (Describe in detail the research to be conducted in IPM） |
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| **List of equipment to be used** |
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| **Publication list related to the application (published articles, conference presentations, awards, and patents)**  (Write the address of a database that shows the publication lists of the principal researcher, such as research map, ORCiD, or Pure) |
|  |

Note

1. The application must be done after discussing about the research proposal and the period with an IPM faculty member of your preferred research division.

2. A research report must be submitted to the general affairs of IPM as soon as the research period is finished.

3. When the space above is not sufficient for the required information, please use a separate sheet (any form) and attach it to this document.