Form 1

**FY2024 Application for Collaborative Research**

**With the Collaborative Research Network**

**For Asian Children with Developmental Disorders**

Date: YYYY MM DD

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Applicant | | | | | |
| Name (Last name first) | | | |  | |
| University/Organization | | | |  | |
| Position | | | |  | |
| Contact Address including post code | | | |  | |
| Telephone Number | | | |  | |
| E-mail | | | |  | |
| Research Topic and Outline | | | | | |
| □Planned collaborative project □General collaborative project　(select one) | | | | | |
| Information on Research Organizations | | | | | |
| Network(JPN) | Name | | | Section/Position | Research Roles |
|  | | |  |  |
| Applicant | Name | | | Organization/Position | Research Roles |
|  | | |  |  |
| Research Timeframe | | | | From YYYY MM DD to YYYY MM DD | |
| Research Expenditure | | | | | |
| Expenses | Items |  | yen | | |
|  | yen | | |
|  | yen | | |
|  | yen | | |
|  |  |  | | |
| Total | | | yen | |
| IRB approval　(Circle one) | | | | | |
| Approved　　 　Submitted　　 　Planning　　 No plan Not Applicable | | | | | |

Form 1

|  |
| --- |
| **Purpose and Significance of Research** |
| **Research Plan** |
| **Major Research Achievements within the Past Five Years Relevant to Proposed Research** |