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(Researcher Form 1) Leading Initiative for Excellent Young Researchers FY2023 Application Form

Rece	ipt Number					
	Research field	Basic Section code				
	Medium-sized Section					
Field	Basic Section					
	Specialized research field					
Keywords						
Name (for display)						
Nationality		Gender				
Date of birth						
Contact						
(E-mail)						
researchmap						
	_					
	Name of institution					
	Institution type					
Current affiliation	Location	Postal code:				
	Name of department/section					
	Position	Employment status				
	Academic status					
	Graduate school					
Academic	Faculty					
background for	Major					
PhD	Completed/ withdrawn YYYY/MM					
	Degree awarded date					
	Degree name					
Enrolled in the medical field which requires						
clinical training						
Research/job						
history						
Research interruption due to						
childbirth/child care						
Research interruption period due to						
childbirth/child care						

	☐ University				
Institution type interested in	☐ Inter-University Research Institute Corporation				
negotiation among the	☐ College of technology				
parties (Up to three)	☐ National Research and Development Agency				
parties (Op to tiffee)	☐ Public Research and Development Institute				
	☐ Company etc.				
Other information to regis	ster				
The items entered hereinafter are to the institutions.	e not used for screening nor displayed in	documents that provide information			
Institution type of first choice					
Institution type of first enoise					
Name					
(name on the family register)					
(name on the family register)	Postal code:				
	1 Ostal code.				
Current address					
	Tel:	Cell phone:			
*It is possible to change the curr	ent address (contact E-mail) after submi				
	file created at the time of submission of				
Agreement upon application Please read the following					
1) Plance shook if you do no	ot agree to provide your information	to the research institutions which			
· · · · · · · · · · · · · · · · · · ·	sts at the time your application has b				
	ent Young Researcher Candidate, you				
	nd your information will be provided				
	he institutions is Form 1 and Form 1				
imormation provided to t	ne institutions is 1 orni 1 and 1 orni 1	Attachment.			
☐ I do not agree to pro been accepted.	vide my information to the institution	ons at the time my application has			
Please check the box if you do not agree to provide your information to the agencies supporting negotiation among the parties at the time the agencies will be decided, after your application has been accepted. In addition, if you are selected as an Excellent Young Researcher Candidate, your name etc. will be listed on the "EYR Candidates list" and your information will be provided to the agencies. The information provided to the agencies supporting negotiation among the parties is Researcher Form 1, Form 1 Attachment, and "Institution type of first choice." Please confirm and agree to the conditions before filing the application.					
be decided after my a	ride my information to the support agreement a				

3)	Before filing the application, please make sure you read the "Application Guidelines for FY
	2023 Leading Initiatives for Excellent Young Researchers." If major errors, omissions and the
	like are identified after the application is filed, the determination as an Excellent Young
	Researcher Candidate or as an Excellent Young Researcher may be revoked. Please confirm and
	agree to the conditions before filing the application.
	☐ I read the "Application Guidelines for FY 2023 Leading Initiatives for Excellent Young
	Researchers" and understood the contents.
	*As for handling of personal information, please refer to the Application Guidelines "V.
	Points to be considered (16) Handling of personal information".
	☐ I confirmed that there are no errors in the application above or attached separately.