Application for Entrusted Research

Date : Month Day, Year

To : Dean of Institute of	, The University of Tokyo
From:	Company Name:
	Address:
	Authorized Representative: Signed by:
	Name in print:
	Title:

As an authorized representative in Company, we request University to accept the following Entrusted Research listed hereunder, and we will follow the regulation of Entrusted Research on the University of Tokyo:

Proposed Particulars

1.	Research Title:				
2.	Overview of Proposed Research:	(Research Purpose :) (Research Description :)			
3. Payment for Research Expenses: (Incl. Consumer Tax.)	Direct Cost	Yen or Dollar			
	Indirect Cost	Yen or Dollar			
	(inci. Consumer Tax.)	Grand Total	Yen or Dollar		
4. Proposed Principle Researcher in the University:		Name: Prof Department:			
5. Research Period:		From through			
6. Proposals for research material and devices.					
7. Proposed Budget for multiple year contract (Estimation)	First Year (2014)	Second Year(2015)	Third Year(2016)	If, following years	
		Yen	Yen	Yen	Yen
8. Others (If any)					

Information for Notice to your Company

Representative

Name of Organization	
Address	
Title	
Responsible person	
Tel	

Charged person

Name		
Department or Section		
Official address to your company		
Correspondence	Tel	
	Fax	
	E-mail	
Remarks		