Date (MM/DD/YY)

To: **Hokkaido University**

Dean of Faculty of [NAME OF DEPARTMENT]

**Applicant**

 [Address]

 [Organization Name]

 [Representative (Name and Title)]

Application for Commissioned Research

In accordance with the *National University Corporation Hokkaido University Operating Regulations on Commissioned Research*, the Applicant hereby applies for a commissioned research for the following subject.

Research Subject：

1. Research Subject

2. Purpose/Description of Research

3. Term of Research：

From (MM/DD/YY) 　To (MM/DD/YY)

4. Designated Investigator:

5. Research Expenses:

　　　　　　　　　　　JPY（tax included）

6. Additional Information necessary for Commissioned Research

7. Administrative Contact of the Applicant

Name of Institution:

Address:

Department:

Name of Contact Personnel:

Tel. Number:

Email Address: