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**FY2020 APPLICATION FORM TO THE JSPS LONDON CALL FOR THE JSPS PRE/POSTDOCTORAL FELLOWSHIP FOR RESEARCH IN JAPAN (SHORT-TERM)**

**\*This form should be typed or printed.**

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| **Proposed Tenure of JSPS Fellowship**  **You must start your fellowship during the period of 1 April 2019 to 31 March 2020. The tenure must be 1-12 months (full months).** | | | | | | |
| **From** | **Year** | **Month** | **Day** | **Total** |  | **month(s)** |
|  |  |  |
| **Proposed Research Title**  **Within 100 letters including spaces and symbols.** | | | | | | |
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| 1. Full Name (Your name must be written in the alphabet used to write the English language and match the name in your passport.) | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| FAMILY (ex. GAKUSHIN) | | | First (ex. Taro) | | | | | | | | | | | | | | | Middle (ex. Edward) | | | | | | | | | |
|  | | |  | | | | | | | | | | | | | | |  | | | | | | | | | |
| 2. Nationality | | | 3. Date of Birth | | | | | | | | | | | | | | | 4. Gender (Put X in the box below.) | | | | | | | | | |
|  | | | Day | | | | Month | | | | | | | | Year | | |  | | | Male | |  | | | Female | |
|  | | | |  | | | | | | | |  | | |
| 5. Current Appointment (If you do not have current appointment, type N/A) | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Institution | |  | | | | | | | | | | | | | | | | | | | | | | | | | |
| Department | |  | | | | | | | | | | | | | | | | | | | | | | | | | |
| Current Position or Status | |  | | | | | | | | | | | | | | | | | | | | | | | | | |
| Country/Region | |  | | | | | | | | | | | | | | | | | | | | | | | | | |
| 6. Academic Degree (Put X in the box below and fill in the blanks.) | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Type (PhD, or an equivalent.) | |  | PhD | | | | |  | | | | Other (Enter the type in the next field.) | | | | | | | | | | |  | | | | |
| Date Obtained | |  | Obtained |  | | Expected | | | | Day | | | | | |  | | | Month | | |  | | Year | | |  |
| Field | |  | | | | | | | | | | | | | | | | | | | | | | | | | |
| Institution | |  | | | | | | | | | | | | | | | | | | | | | | | | | |
| Country/Region | |  | | | | | | | | | | | | | | | | | | | | | | | | | |
| 7. JSPS Fellowship(s) you were granted in the past (Put X in the box below and fill in the blanks.) | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | N/A | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | Postdoctoral Fellowship(Strategic) | | | | Fiscal Year | | | | | | | | |  | | | ID Number that starts with GR | | | | | | | |  | | |
|  | Postdoctoral Fellowship (Summer Program) | | | | Fiscal Year | | | | | | | | |  | | | ID Number that starts with SP | | | | | | | |  | | |
| 8. Names of Other Fellowship(s) for which you are applying (Put X in the box below and fill in the blank.) | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | N/A | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | JSPS Postdoctoral Fellowship for Research in Japan (Standard) application through Japanese host researchers/institutions | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | JSPS Postdoctoral Fellowship for Research in Japan (Standard) application through overseas nominating authorities | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | JSPS Postdoctoral Fellowship for Research in Japan (Short-term) application through Japanese host researchers/institutions | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | Other Fellowship(s) (Enter the names in the next field.) | | | | | | | | | |  | | | | | | | | | | | | | | | | |
| 9. Contact Information (Fill in the sections below indicating your preference to receive further correspondence from JSPS, including your award documents package if selected) | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | Office/Institute | | | | | | |  | | | | Home | | | | | | | | | | | | | | | |
| Mailing Address | | | | | | | | Mailing Address | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | |  | | | | | | | | | | | | | | | | | | | |
| Phone (Main and Personal) Give the phone number that begins with country code: | | | | | | | | + | | | | |  | | | | | | |  | | |  | | | | |
| E-mail Address (Main and Personal) | | | | | | | | |  | | | | | | | | | | | | | | | | | | |
| 10. Proposed Host Researcher/Host Institution | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Full Name | | |  | | | | | | | | | | | | | | | | | | | | | | | | |
| Title | | |  | | | | | | | | | | | | | | | | | | | | | | | | |
| Department | | |  | | | | | | | | | | | | | | | | | | | | | | | | |
| Institution | | |  | | | | | | | | | | | | | | | | | | | | | | | | |
| Phone number | | |  | | | | | | | | | | | | | | | | | | | | | | | | |
| Email address | | |  | | | | | | | | | | | | | | | | | | | | | | | | |

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| 11. a) Higher Education (Include your current status if you are a doctoral student at the moment.) | | | | | | | |
| Name of University | Location  (city and country) | | Degree and Grade obtained | | Field | From – To  (Month, Year) | |
|  |  | |  | |  |  | |
| 11. b) Other professional qualifications | | | | | | | |
| Name of University | Location  (city and country) | | Title of qualification and grade obtained | | Field | From – To  (Month, Year) | |
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| 12. Previous Employment (Start from your earliest position to your current appointment.) | | | | | | | |
| Name of Institution | | Location  (city and country) | | Position | | | From – To  (Month, Year) |
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| 13. Academic Awards (Title, Organization, Year) | | | | | | | |
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| 14. Language Ability (5: excellent ………1: poor) | | | | | | | | |
|  | Reading | | Writing | Listening | | Speaking | |
| Japanese | 5 4 3 2 1 | | 5 4 3 2 1 | 5 4 3 2 1 | | 5 4 3 2 1 | |
| English | 5 4 3 2 1 | | 5 4 3 2 1 | 5 4 3 2 1 | | 5 4 3 2 1 | |
|  | 5 4 3 2 1 | | 5 4 3 2 1 | 5 4 3 2 1 | | 5 4 3 2 1 | |
|  | 5 4 3 2 1 | | 5 4 3 2 1 | 5 4 3 2 1 | | 5 4 3 2 1 | |
|  | 5 4 3 2 1 | | 5 4 3 2 1 | 5 4 3 2 1 | | 5 4 3 2 1 | |
| 15. Past/Present Stay(s) in Japan over 3 months | | | | | | | |
| Location | | From – To(Month, Year) | | | Purpose of the stay | | |
|  | |  | | |  | | |
| 16. Past Research and Achievements | | | | | | |
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| 17. List of Major Publications  Please include all authors, title, Journal, Vol., No., pp., Month, Year  (This list should only include peer-reviewed work that has been accepted for publication or is in press.) |
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| 18. Research Plan in Japan. Please include the following:  a. Present research related to plan, b. Purpose of proposed research, c. Proposed plan with timeline for achievements, d. Expected results and impact, e. Merit of undertaking research in Japan |
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| 18. Research Plan in Japan (Continued) |
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| 19. Details of your academic goals and career prospects after the fellowship | | | |
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| 20. Details of other grants you are currently applying for | | | |
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| 21. Referee’s Details (1): Referee’s Details (2): | | | |
| Name: |  | Name: |  |
| Position in Institution: | Position in Institution: |
| Address: | Address: |
| Tel: | Tel: |
| E mail: | E mail: |
| Relationship: | Relationship: |
| 22. Correspondence  23. Invitation Letter | | | |

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| 24. Required Conditions for the applicants of this fellowship. **You are not eligible to apply if you do not meet all the following conditions:** |
| ☑ I am not a Japanese national or do not have permanent residency status in Japan. (If you are applying for or planning to obtain Japanese nationality/permanent residency, please note that the Fellowship will terminate on the day you acquire either of them.)  ☑ I have not been received a Fellowship(s) in the past. If you were awarded one or more of the following fellowship(s) but did not accept it/them, you are eligible to apply.  a) JSPS Postdoctoral Fellowship for Research in Japan (Standard)  b) JSPS Postdoctoral Fellowship for Research in Japan (Pathway)  c) JSPS Postdoctoral Fellowship for Research in Japan(Short-term)  ☑ I do not have a residency card with a mailing address in Japan.  ☑ My doctorate was/will be conferred by an institution outside of Japan.  ☑ My research is not related to military affairs.  ☑ I agree to all data in this application being processed by JSPS offices in compliance with General Data Protection Regulations. |

**I have read the above conditions and I meet all of them. I certify that the information provided on this application is true and correct.**

Date:

Full Name (Print) :

Signature: