The 32nd (2023)

Health Research Grant

- Internal Joint Research for researchers for all ages –

Joint Research Agreement

|  |  |  |
| --- | --- | --- |
| Name of Joint Research Applicant |  |  |
| TO : 　　　　　　　　　 |  |  |

I agree to conduct the collaborative joint research program as described below.

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| Research Subject **＊Check to be sure that this Research Subject is same as shown in the Application.**  |
|       |
| (A) Description of significance and necessity of your (Joint Researcher’s) participation in the  International Joint Research. **\*Copy-paste text (A) from the List of Joint Researchers.** |
|       |
| (B) Description of reasons behind your (Joint Researcher’s) participation in this International  Joint Research. **\*Copy-paste text (B) from the List of Joint Researchers.** |
|       |
| (C) Description of your (Joint Researcher’s) responsibilities in this International Joint Research. **\*Copy-paste text (C) from the List of Joint Researchers.** |
|       |

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| Joint Researcher | Name |       |
| Institution |       |
| Title |       |

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| --- | --- | --- |
|  |  | ／　 　　　　　／2023 |
| Signature  |  | Date of signature (MM/DD/YY) |