奨学会記入欄:地区/奨学生番号

## 2022 年度海外学友会推薦 ロータリー米山奨学生申込書

日本語あるいは英語にて記載して下さい。 Fill in this form in Japanese or English.

| Family name(姓)   |                             |           | First name(名) |            |    |        |
|--|-----------------------------|-----------|---------------|------------|----|--------|
| 漢字   |                             | 漢字        |               |            |    |        |
|  |                             |           |               |            |    |        |
| <br>  <del>                                   </del>               |                             |           |               |            |    |        |
| 英文(English)<br>名   | 氏<br><sub>英文(English)</sub> |           | 英文(English)   |            |    |        |
|  |                             |           |               |            |    | 7014-  |
| カタカナ   |                             | カタカナ      |               |            |    | Photo  |
|  |                             | 1 2 7 7 7 |               |            |    |        |
|  |                             |           |               |            |    |        |
| □ 男 □ 女  | 生年月日                        |           |               |            |    |        |
| 性別 Male Female   | Birth Year                  |           | 年 月           | 日(         | 歳) |        |
|  | Month (Age)                 | Year      | Month D       | ay Ag      |    |        |
| 国籍•地域  |                             |           | 在留資格          |            |    |        |
| Nationality  |                             |           | Visa Status   |            |    |        |
| 配偶者名   |                             |           |               |            |    | 年齢     |
| Name of Spouse   |                             |           |               |            |    | Age    |
| 子供の氏名  |                             |           |               |            |    | 年齢     |
| Name of Child<br>子供の氏名   |                             | -         |               |            |    | Age    |
| 一<br>大供の氏名<br>Name of Child  |                             |           |               |            |    | 年齢     |
| Traine of Child  |                             |           |               |            |    | Age    |
|  |                             |           |               |            |    |        |
| 力 <i>与</i> 分字C   |                             |           |               |            |    |        |
| 自宅住所<br>Home Address   |                             |           |               |            |    |        |
| nome Address   | Tel                         |           |               | Fax        |    |        |
|  | e-mail                      |           |               | ,          |    |        |
| <u></u><br>現在の所属機関名  |                             |           |               | 公山野        |    |        |
| Name of Present  |                             |           |               | 役職         |    |        |
| Employer / Institution   |                             |           |               | Position/  |    |        |
|  |                             |           |               | Occupation |    |        |
| 現在の所属機関住所  |                             |           |               |            |    |        |
| Address of Present   |                             |           |               |            |    |        |
| Employer / Institution   |                             |           |               |            |    |        |
| 専門分野   |                             |           |               |            |    |        |
| Research Specialty   |                             |           |               |            |    |        |
| 日本の受入機   | <b>&amp;</b> 盟名             |           |               |            |    |        |
| Name of Host Institu   |                             |           |               |            |    |        |
| -  | 3 07 0022                   |           |               |            |    |        |
| 受入機関住所<br>Address of Host  |                             |           |               |            |    |        |
| Institution  |                             |           |               |            |    |        |
| 1110010401011  |                             | Non-      |               |            |    |        |
|  |                             | Name      |               |            |    |        |
| 指導教官名・共同研究者名<br>Host Research Adviser / Host Scholar               |                             |           |               |            |    |        |
|  |                             | Tel       |               | T.         | ov |        |
| areas recognistivities / 1108t pellotar                            |                             | Tel Fax   |               |            |    |        |
| *  |                             | e-mai     | il            |            |    |        |
| 在空期間 Duoross 1 E II II II E  |                             |           | i             |            |    | 合計月数   |
| 研究期間 Proposed Fellowship Term<br>from Month / Year to Month / Year |                             |           |               |            |    | Total  |
| mom mondi / iear i   | .o monun / rear             | 1         |               |            |    | Months |
| 研究題目   |                             | 1         |               |            |    |        |
| Intended Theme of R  | lesearch                    | *         |               |            |    |        |
|  |                             |           |               |            |    |        |



学歷 Educational Background: List all institutions of higher education and professional schools attended in chronological order.

Professional Background: List all academic and professional positions held in chronological order.

応募者の主要な著書および論文 Give a bibliography of your major publications, important articles and monographs.

## 日本における研究計画の概要(800 字から 1,000 字以内で記入)

Outline your proposed research plan in Japan in 800 to 1,000 wards. It is to be noted that to fill in this form. Write with scrupulous care.

| 受入責任者<br>Name of Director of<br>Institution in Japan         |     |                               |  |  |  |
|--|-----|-------------------------------|--|--|--|
| 受入責任者住所<br>Home Address of Director/<br>Institution in Japan |     |                               |  |  |  |
|  | Tel | Fax                           |  |  |  |
| 受入責任者の所属機関名<br>Name of Employer/<br>Institution in Japan.    |     | 役職<br>Position/<br>Occupation |  |  |  |
| 受入責任者の所属機関住所<br>Employer / Institution                       |     |                               |  |  |  |
| Address in Japan   | Tel | Fax                           |  |  |  |

公益財団法人ロータリー米山記念奨学会 御中 To Rotary Yoneyama Memorial Foundation

| 申込年月日 |                       |  |
|-------|-----------------------|--|
|       | Date of Applying      |  |
|       |                       |  |
|       |                       |  |
|       |                       |  |
| 申込者署名 |                       |  |
|       | Applicant's Signature |  |