

## Questionnaire for University (related to research plan)

Filled in by Applicant

※Please fill in ALL the yellow columns.

Basic Information of Applicant	
Name of the University you are contacting	
Name of Graduate School	
Name of course	
JICA Program	
Name of Applicant	
E-mail Address	
Country	
Organization	
Department/Division	
Present Position	
Final Academic Background	_____ University Department/Graduate School of _____
Field of Study (FS) / Specific Research Field (SRF)	(FS) _____ (SRF) _____
Research Theme (tentative theme is acceptable)	

Questions to the University
<p><b>*Questions must be related your research plan</b></p>