

URP 'Platform for Leading-Edge Urban Studies'
Application Form for Young Special Researchers (February 2015 Applications)

1. Applicant Qualifications, Etc.

Category Applying for (Circle the appropriate category)	【Global Course】 A-1 A-2 A-3 A-4 【Meister Course】 B-1 B-2 B-3 B-4
Name	
Sex	
Nationality	
Date of Birth	
Education	【Undergraduate】 • Date of graduation • Name of university, faculty, and department 【Master Degree Course】 • Date of Entry • Name of graduate school, department, and major • Date of (expected) completion
Doctoral Degree Status	【Doctoral Course: {entry planned • now registered • completed • withdrawn}】 • Date of (expected) entry • Name of graduate school, department, and major • Date of (expected) completion or withdrawal • Total time absent from school: years months 【Doctoral Dissertation】 • Name of university • (Planned) Title • (Expected) Date of receiving doctor's degree
Research and Employment History	
Current (or former) research supervisor	• Affiliation: • Position: • Name:
Host researcher after acceptance	• Affiliation: (Osaka City University) • Position: • Name:
Research supervisor after acceptance	• Affiliation: • Position: • Name:
Affiliation after acceptance (planned)	
Current affiliation	
Current residence	
Contact information	

Applicant's Name _____

2. Research Status up to the Present

(The form cannot be altered or amended. However, you may adjust the area of the dotted lines).

Research background and goals

Research methods and (expected) prospects

Unique features of your research

Research Results (expected)

Applicant's Name _____

3. Research plan after being accepted as a Special Researcher

(The form cannot be altered or amended. However, you may adjust the area of the dotted lines).

3-1 Research Contents

Research theme
Background and objectives
----- Research methods and framework
----- Relation to the research activities of the host researcher
----- Special features and originality in your proposed research plan

Applicant's Name _____

3-2 Yearly Plan and Budget

Proposed period as Special Researcher: From (Yr) (Month) to (Yr) (Month) (= yrs and months)				
Expected date of completion: (Yr) (Month) (expected date of submission of dissertation, etc.)				
Yearly research plan (1 st Year) (2 nd Year) (3 rd Year)				
----- Employment (only for those who apply for A-4 or B-4 and who can work at URP) Proposed period of work and conditions (days and hours available per week)				
----- Budget (Please fill in the specific details regarding your proposed research plan and amount of expenses in case of the Global Course, or the details of your research methods, yearly research plan, and amount expenses in case of the Meister Course). (1 st Year) (2 nd Year) (3 rd Year)				
Proposed amount of expenses	FY2015	FY2016	FY2017	Total
	¥	¥	¥	¥

Applicant's Name _____

4. Research Accomplishments

(The form cannot be altered or amended. However, you may adjust the area of the dotted lines).

Articles, commentary, or reports published in academic journals or authored books (peer-reviewed)
Articles, commentary, or reports published in academic journals or authored books (others)
Presentations at international conferences
Presentations at conferences or symposia in Japan
Other (Patents, reports, etc.)

5. Research funding and scholarships already received and/or planning to apply for:

(The form cannot be altered or amended. However, you may adjust the area of the dotted lines).

Japan Academic Promotion Association Special Researcher
Scientific Research Funding Assistance
Other research funding
Other scholarships
Other

Applicant's Name _____

6. Evaluation by Research Supervisor, etc.

(The form cannot be altered or amended. However, you may adjust the area of the dotted lines).

6-1 Evaluator 1 (Host Researcher after acceptance)

Evaluator's (Host Researcher's) affiliation, position, and name Osaka City University	(signature)
Professional relationship to the applicant	
Please give your opinion of the applicant's research abilities	
Please give your opinion on the applicant's future prospects as a researcher	

Applicant's Name _____

6-2 Evaluator 2 (Current research supervisor or corresponding person. It cannot be the same person as Evaluator 1)

Evaluator's affiliation, position, and name	(signature)
Professional relationship to applicant	
Please give your opinion of the applicant's research abilities	
Is there anything that you believe may serve to help in our judging of the applicant's future prospects as a researcher? (E.g., awards received, foreign exchange student experience, extra-curriculum special activities, etc.)	

Applicant's Name _____