

THE MATSUMAE INTERNATIONAL FOUNDATION

Address: 4-14-46, Kamiogi, Suginami-ku, Tokyo 167-0043 JAPAN

Document #1

APPLICATION FORM FOR 2019

(MIF USE ONLY)

1 I would like to apply for a fellowship for the period of _____ months, between _____ and _____
(Month) (Year) (Month) (Year)

2 Nationality _____

3 Full name (same as the name in the passport)

Mr./ Ms. _____ / _____
(Family Name) (Given Name)

4 Date and Place of Birth, and Age

_____ Years old
(Month) (Day) (Year) (Place)

5 Postal Address to be used by the Foundation

Tel : _____ E-mail : _____

6 Current Employment (Title, Name of Organization)

7 Please list your immediate family members.

Name	Age	Relationship
_____	_____	_____
_____	_____	_____

8 Educational History

Period	Name of Institution	Academic Major	Degree
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

9 Title (subject) of Ph.D. Thesis

10 Current educational activity, if any.

Name of Institution	Starting date and expected completion
_____	_____

Place	Main Subjects	Expected Degree
_____	_____	_____

11 Previous Stays in Japan

Period	Place	Purpose	Financed by
_____	_____	_____	_____

Photo 4.0 × 3.0cm Paste your photo in this square.

Height _____ cm

12 Research Project in Japan

[Title]

[Brief Summary] Describe your research within 10 sentences and enclose the Details in "Document #2."

13 Language (Evaluate using Excellent, Good, Fair and Poor)

	Writing	Reading	Speaking
English	_____	_____	_____

14 Future Professional Plans

_____ in which country? _____

15 Previous Employment

Institution	Location	From-To	Position	Type of Work
_____	_____	_____	_____	_____

16 Please list major awards or fellowships which you have received.

Name of Award	Organization	Period	Type of Award
_____	_____	_____	_____

17 Please list other fellowships for which you are currently applying or planning to apply.

Name of Fellowship	Organization	Period	Type of Fellowship
_____	_____	_____	_____

18 Host Scholar in Japan (Please enclose his/her Letter of Invitation as "Document #7".)

Name _____

Position or Title _____

Institution _____

Address _____

Tel : _____

19 Name of the nearest airport from your domicile.

20 I fully understand and agree to the "Fellowship Announcement", and I hereby certify that all the descriptions above are true and that I am perfectly healthy both physically and mentally.

Date : _____ Signature : _____

(Application without your signature is not acceptable.)

Check-List

* Please make sure to include all the required documents as instructed.

No.	APPLICATION DOCUMENTS	✓
#1	Application Form with photograph (4 × 3 cm)	
#2	The Research Project	
#3	A reprint of Most Important Publication	
#4	Personal History (Curriculum Vitae) including the complete List of Publications	
#5	Letter of Recommendation from the Employer	
#6	Certified Copies of Academic Certificates	
#7	Invitation Letter by the Host Scientist	