## FY2023Application Form for Joint Research Task of IOES

To Director of Institu	nte of Ocean Energy, Saga Uni	versity.	_	,	,
D.:	·		<u>Dat</u>	te: /	/
<b>Principal Investigator</b> * Name:			(Your sig	motura)	
	College, etc.) and position:		(10ul sig	mature)	
institution (Oniversity, C	conege, etc.) and position				
				*Please	describe it exactly
Phone No.: +	- FA	X No.: +	_		
E-mail address:	(a)				
* Principal investigator of the project.	is a responsible person for your pro	posed joint resea	arch project. It	t may be differer	nt from a cente
I will apply for the resea	arch category and grant.				
Research Categories	Fiel	d		Necessity of Grant	
				Necessary	Not
Specially Promoted Research A	Research of Ocean Thermal E	Energy Conversi	ion (OTEC)		
Specially Promoted Research B	Research of Wave Energy Conversion				
Specially Promoted Research C	Research of Tidal Power Generation				
Specially Promoted Research D	Research of Offshore Wind Power Generation				
General Joint	Research of Ocean Energy v		lated to the		
Research	above-mentioned four field				
	h categories "Specially promoted A	, B, C, D or Gen	eral joint rese	arch" and put a	check mark 🔽
into the check box of "N					
<del>-</del>	grant for your proposed research, y				
<u> </u>	apply our grant, please send this ap	oplication form u	until dead line	e. (Dead line: sh	ow application
procedure)					
	±				
	ect [□ New □ Continued] †If continue	ed your last year reso	earch as same pr	roject title, please cl	noice [Continued]
Title:					
II. Project members.	†Please add lines, if you would like to	write more membe	rs.		
	•			Phone No.	
Name	Research institution	Position**	Gender -	E-mail address	ddress
			-		

 $<sup>\</sup>ensuremath{^{**}}$  In case of graduate school student, please describe their graduate courses and school year.

III. Devices which you demand. †Please add lines, if you would like to write more devices.

	Device No.***	Date of use (approx. month, year)	Time of use****
1st			
2nd			
3rd			
4th			

\*\*\* Please show IOES web site. \*\*\*\* Please write hour(s) or day(s) your using.

Ι	IV. Research meaning, purpose, plan, feature and prospective result.			

V. Research subject and preliminary conditions related to your application.			
VI Descende when and Mathe of (Community)			
VI. Research plan and Method (Summary)			

## VII. Statement of costs for devices and consumable

Itemize	Device	Amount [A]	Unit price [B] (unit: JPY)	Total amount (A x B)
				Total:

VI	VIII. Other items				
>	Bringing apparatuses or labware:				
>	Matter(s) to be careful about the handling (e.g. bringing poisons or radioactive substances):				
>	Special report:				

IX. Organizer name of IOES *Please show the application procedure			

* Accept Date.	
* Accept No.	
* Adoption No.	

<sup>\*</sup> These columns will be filled by IOES.