Application Form for

Child-care Grants for those Attending Academic Conferences

To the Director of Office for the Promotion of Diversity

　　 Application date:

Applicant’s Affiliation:

　　　　　　 Title:

　　　　　 Name:

|  |  |
| --- | --- |
| Name of Academic Conference |  |
| Name of Chairperson of Academic Conference |  |
| Brief overview of the Academic Conference (See \*1) |  |
| The role of applicant in Academic Conference |  |
| Applicant’s place of contact | Contact place at University:  Tel:　　　　　　　　　　　　　　　　　　　　　　　　　　　　　　　　　　　　　　　　　　　　　　　　　　　　Email |
| Meeting period | DD MM YYYY 　～　　 　DD MM YYYY |
| Venue |  |
| Number of participants |  |
| Number of children in need of the nursery |  |
| Do you have financial assistance from the Conference or other institution? | Yes / No If yes, explain briefly |
| Nursery Location | ・Yotsuya Campus Sophia Nursery  ・other（　　　　　　　　　　　　　　　　　）  　　　　　　　＊Indicate the specific place you are using. |

＊1　Please attach a copy of the notification letter in which the schedule of the conference is indicated (it can be a tentative plan).