

To Director of the Office for the Promotion of Diversity

Application form for Research Assistant System (*Kenkyu Shienin Seido*)

【Applicant】

Name	
Affiliation	
Contact	Tel (extension no.) : E-mail :
Research Assistant's Supporting Activities	
Performance Goal * (Thesis, international conference, etc.)	

【Research Assistant】

Name			
Date of Birth		Student No.*	
Affiliation *	(Department, Major, Lab)		
 Immediate Supervisor :		
Contact	Home Address : Tel : E-mail :		
Contract Term	,2018 to March 31, 2019		
Working Hours	Time/Day		hr/w

*Students Only. Please also fill out the “form 3” and submit to the office.