

Institutional Project Support (IPS) Program in Japanese Studies Concept Paper Form

Date: (Yr.) (Mo.) (Day)
 / / /

I. Applicant

Applying Institution (e.g. university, institute)			
In English			
(In Japanese)			
Address of Institution		Legal Status	

Department (e.g. Department/Division, Center, Institute, etc.) that will conduct the project within the Applying Institution	
Department Name	

Project Director	
Name	(Please indicate preferred honorific)
Title	
Telephone	
Email address	

II. Project Concept

Project Title			
Grant Period*	Year/Month/Day	Year/Month/Day	Total number of months
	from	to	
Approximate Project Cost**		Total Project Cost	Amount Request from JF
	1 st year		
	2 nd year		
	3 rd year		
	Total		
<p><i>*All payments and reimbursements must be made within Grant Period.</i></p> <p><i>**Please add an additional line to reflect a fourth year in the case where a faculty-hire component results in a 4-year project. Please see Application Guidelines and Instructions for further details.</i></p>			
Project Abstract (Background, purpose, and overview including the type and brief timeline of the project)			