**2022年度　Diversity, Equity, and Inclusion（DEI）**

**推進に向けた研究助成**

**FY2022 Research Grant for the promotion of Diversity, Equity, and Inclusion (DEI)**

**申請書 / APPLICATION FORM**

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| 申請代表者情報/ APPLICANT | | |
| 所属・職位・氏名  Affiliation/Position/Name |  | |
| 連絡先  / Contact Details | 内線Ext.：  E-mail: | |
| 共同研究者情報（該当なしの場合は記載不要。複数の共同研究者がいる場合は表を追加してご記入ください。）/ Co-RESEARCHER (If not applicable, no entry is required. If you have more than one co-researcher, please add a table.) | | |
| 所属・職位・氏名  Affiliation/Position/Name |  | |
| 連絡先  / Contact Details | 内線Ext.：  E-mail: | |
| 申請代表者が学生の場合：指導教員情報/ SUPERVISOR INFORMATION (If the applicant is a student) | | |
| 所属・職位・氏名  Affiliation/Position/Name |  | |
| この申請について指導教員の了承を得ています/I have obtained the approval of my supervisor for this application. | |  |
| 研究課題名/ RESEARCH SUBJECT | | |
|  | | |
| 研究課題が該当する条件を選択してください/ Select the applicable criteria  大学等研究機関におけるDEI推進に寄与する研究課題/ Research proposals that contribute to the promotion of DEI in universities and research institutes  自然科学分野、人文・社会科学分野等アカデミアにおけるDEI推進に寄与する研究課題/ Research proposals that contribute to the promotion of DEI in academia, such as in the natural sciences, humanities, and social sciences  □本学構成員のDEI意識の向上に寄与する研究課題/ Research proposals that contribute to raising awareness of DEI promotion among members of Hokkaido University | | |
| 研究内容/ RESEARCH CONTENTS　*（研究内容全体で２ページを超えないこと/ The RESEARCH CONTENTS should be prepared within 2 pages.）* | | |
| 背景・目的/ BACKGROUND・PURPOSE  *本助成の趣旨を鑑みて記載してください。/Please describe in consideration of the purpose of this grant.* | | |
| 研究計画/ RESEARCH PLAN | | |
| DEI推進への寄与/ Contribution to the Promotion of Diversity, Equity and Inclusion  *この研究が、大学等研究機関やアカデミアにおけるジェンダー平等、男女共同参画、多様性の尊重、本学構成員の意識の向上など、DEIの推進にどのような影響を与えてどう寄与するのか説明してください。/ Please explain how this research will impact and contribute to the promotion of DEI, including gender equality/equity, respect for diversity in universities and research institutions or in academia, and raising awareness of DEI promotion among members of Hokkaido University.* | | |

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| 予算内訳（用途、金額）本支援による支出予定額がわかるように記載して下さい。  COVERED EXPENSES (Use, Amount)  Please write the estimated amount by this support. | |
| 費目/ Item | 内容・金額/ Contents・Amount |
| 消耗品費  / Supplies expenses |  |
| 国内旅費  / Domestic travel expenses |  |
| 謝金  / Rewards |  |
| 通信運搬費  / Communication and transportation expenses |  |
| 借損料  / Rental fee |  |
| 雑役務費  / Other service expenses |  |
| その他  / Other |  |
| **合計**  **/ Total** |  |

*＊本書式内の青字箇所は全て削除の上、申請してください。*

*Please delete all blue text in this form before submitting the application.*