Date:

Letter of Consent

To Director, IMEG

Kumamoto University

Institute Name:

Address:

Name/Title:

Signature:

I hereby give my consent for the prospective Project Leader described below to apply for the IMEG Joint Usage/ Research Project FY2017.

1. Project Leader

Title:

Name:

- 2. Project Title:
- 3. Project Period: From DD/MM/YYYY to DD/MM/YYYY