Day to submit：dd/mm/yyyy

Planning of Off-campus Training courses

Graduate School of Frontier Science Initiative

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| --- | --- | --- |
| Current affiliation | Student Number | Name |
| □Transdisciplinary Sciences□Nano Life ScienceDoctoral course year |  |  |

|  |  |
| --- | --- |
| Host Institution |  |
| Country |  |
| Training Period | dd/mm/yyyy　～　dd/mm/yyyy （　　 days ） |
| Working day※Date of actual activity |  |
| Standard training hours per day | 　～　　 |
| 【Purpose and Summary】 |
| 【Other plans during study abroad】※If you plan to move to another organization or attend an academic conference during the training period, specify the period and destination. |

（Continued on back）

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| 【Other plans during studying abroad (Continued）】 |
| ※If you plan to move to another organization or attend an academic conference during the training period, specify the period and destination. |

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| I accept your planning of study abroad.　　【 Supervisor 】　　　　　　　　Name（Signature） |