

Application Form for Designated Grant Allocation

Date: _____

To: The President
The Japan Foundation

With regard to the Designated Grant about which I received the informal notification of allocation dated _____ (Document number _____) I wish to implement the Grant-Financed Project as indicated below. Therefore I hereby apply for allocation of the Designated Grant indicated below in accordance with Paragraph 1, Article 15 of the Japan Foundation Regulations for the Administration of the Designated Donations Program.

Applicant

Name of representative:

Signature or seal:

Address:

Description

- 1 Amount of Designated Grant applied for JPY _____
- 2 Grant-Financed Project
 - (1) Name of project:
 - (2) Dates of project implementation: from _____ to _____
 - (3) Purpose, plan details, and anticipated effects of project:

(4) Planned budget for income and expenditure

(Unit:)

Income		Expenditure		
Item	Amount	Item	Amount	Amount of Designated Grant used (Breakdown of estimated cost)
1. Japan Foundation Designated Grant				
Amount applied for this time				
Amount previously allocated				
Amount scheduled for forthcoming fiscal year(s)				
2. Own funds				
3. Other organizations (describe each of them separately)				
4. Others				
Total		Total		

(Foreign exchange rate: _____ =JPY _____)

Note 1: If the amounts you wish to enter are in a foreign currency, please enter an exchange rate for the currency to Japanese Yen.

Note 2: If your project has already been received or scheduled to receive other Designated Grant(s), please state the amount(s) under "Amount previously allocated" or "Amount scheduled for forthcoming fiscal year(s)" respectively. However, it is not necessary to state such amounts in the case of single-year project plans.

3 Grantee

Name of organization _____

Type of legal entity (e.g.,
foundation, association): _____

Date of establishment: _____

Representative - Title: _____ Name: _____

Person in charge of
administration - Title: _____ Name: _____

Address: _____

Telephone number: _____ Facsimile number: _____

Email: _____

4 Remittance address

Name of bank: _____

Name and address of branch: _____

Type of account (savings account/current account): _____

Account number: _____

SWIFT/BIC: _____

ABA (if applicable): _____

IBAN (if applicable): _____

Name of account holder: _____

Contact address of account holder: _____

Telephone number of account holder: _____

Currency: _____

Note: This form is subject to modification under the supervision of the President of the Japan Foundation.