Academic Supervisor Approval

Date

To

Director of the Neutron Science Laboratory

The institute for Solid State Physics, The University of Tokyo

Affiliation:

Position：

Name of Academic supervisor：

Signature：

I hereby give my approval for the following doctoral student to apply as a Principal Investigator for the General User Program at JRR-3, which is operated by Neutron Science Laboratory, Institute for Solid State Physics, University of Tokyo. I also promise to ensure that the student will comply with the rules of your facility and the Japan Atomic Energy Agency (JAEA), including that staff members of my group will accompany the student when he/she enter the experimental halls of JRR-3. In the event of an accident, damage to equipment, or other unforeseen circumstances, I will cope with responsibility.

1.Name of doctoral student：

Faculty Course：

2.Title of Proposal：

3.Period of Experiment： From to

4. Contact information of academic supervisor

Phone number：

E-mail address：

Academic Supervisor Approval（Sample）

※Fill in the form written in red

Date mm/dd/yyyy

To

Director of the Neutron Science Laboratory

The institute for Solid State Physics, The University of Tokyo

Affiliation: The institute of Solid State Physics, The University of Tokyo

Position: Professor

Name of Academic supervisor： Given name, (Middle Name) Surname

Signature：

I hereby give my approval for the following doctoral student to apply as a Principal Investigator for the General User Program at JRR-3, which is operated by Neutron Science Laboratory, Institute for Solid State Physics, University of Tokyo. I also promise to ensure that the student will comply with the rules of your facility and the Japan Atomic Energy Agency (JAEA), including that staff members of my group will accompany the student when he/she enter the experimental halls of JRR-3. In the event of an accident, damage to equipment, or other unforeseen circumstances, I will cope with responsibility.

1.Name of doctoral student：Given name, (Middle Name) Surname

Faculty Course：Doctoral Course

2.Title of Proposal：Emergence and control of cooperative phenomena in driven nanomaterial

3.Period of Experiment： From mm/dd/yyyy to mm/dd/yyyy

4. Contact information of academic supervisor

Phone number： xxxx-xxx-xxxx

E-mail address：u.tokyo@xxxxx.xxxx