(Form 2)

Business trip confirmation form

Name:		seal/signature
Project number :		
Research project title:		
Joint research implementat	tion date :	
Business trip date:		
Place:		
Joint researchers (those lis	ted on the application fo	rm and conducting research together
during trip)		
1.		
2.		
3.		
		ve conducted joint research with me
	Affiliation:	
	Name:	seal/signature

* Can be a joint researcher in the event that researchers were not accompanied by a member of the Institute of Tropical Medicine