**CERTIFICATE OF ACCEPTANCE**

This is to confirm that our institution has agreed to accept:

Name of Applicant:

Affiliation in Japan:

as a [Specific Position Title] in our laboratory/department for the period from (MM/DD/YYYY) to (MM/DD/YYYY).

During this period, the applicant will receive a salary of [Amount] per year.   
[or「No salary will be provided during this period.」]

The applicant will engage in research on the following topic:

[Research Topic]

I confirm that our institution will provide the necessary facilities and supervision for the applicant to conduct their proposed research.

Name of Host Researcher:

Title/Position:

Department:

Institution:

Address:

Email:

Telephone:

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_