



For NanoLSI Use Only
Application Number: _____
Application Receipt Date: MM/DD/2026

Academic Year 2026 Bio-SPM Collaborative Research Application and Pledge Form

The applicant must prepare the items below and submit them to the Bio-SPM Collaborative Research Office at WPI-NanoLSI, Kanazawa University, through the following e-mail address.

- Completed Form 1 (this form)
- Curriculum vitae for the principal investigator (applicant) only

E-mail: nanolsi_opf002*ml.kanazawa-u.ac.jp (Please replace the asterisks (*) with @)

(1) Research Project

Title of the Research Project				
Keywords	List approximately five keywords			
Bio-SPM Technology to be Used (Select one)	<input type="checkbox"/> Atomic resolution/3D-AFM	<input type="checkbox"/> High-speed AFM	<input type="checkbox"/> SICM	<input type="checkbox"/> AFM for Cell measurement
<input type="checkbox"/> Please mark if applying for the Extended Visiting Track				
Project categories (New or continued)	<input type="checkbox"/>	New research project		
	<input type="checkbox"/>	Continued research project, taken over a previous <u>Bio-SPM Collaborative Research</u> If you check here, fill out the below items. In the case of a new research project, you can skip the below part.		
Title of Previous Project				
Previous Research Period	MM/20XX – MM/20XX			
Research Results from the Previous Project (Publications, etc.)				

(2) Principal Investigator (Applicant): Person Responsible for the Research Project

Name			
Date of Birth	MM /DD/YYYY (XX years old)	Sex	Male / Female
Affiliated Institution	Institution Name		
	(Department/ Division)		
	Position		
	Postal Address		
	Phone number		
	E-mail	XXXX@XXXXX.XXX.XX	
NanoLSI Associate? * NanoLSI Associates are graduates of the WISE program for Nano-Precision Medicine, Science, and Technology, at KU.		<input type="checkbox"/> Yes	<input type="checkbox"/> No

(3) Questions Regarding Application Submission

Apply for support for travel & accommodation support?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Why do you want to use Bio-SPM technologies in NanoLSI? (max 3 lines)		
How did you find out about the NanoLSI Bio-SPM Collaborative Research Program? <input type="checkbox"/> Research papers <input type="checkbox"/> Conference presentations <input type="checkbox"/> Acquaintance <input type="checkbox"/> NanoLSI's website <input type="checkbox"/> Other (Please specify _____)		
Have you contacted a NanoLSI faculty member to discuss the feasibility of this research proposal?		
<input type="checkbox"/> Yes <input type="checkbox"/> No	If "yes," please write the name(s) of the contacted person(s). (Our students should not be listed.)	

(4) Research Project Team (List of Collaborating Researchers)

List all participants except NanoLSI faculty. Add more fields if necessary.

1.	Collaborating researcher:		Affiliated Institution	
	Name			
	Position		Address	
	Age	XX years old		
	Sex	Male/Female		
2.	Collaborative partner researcher:		Affiliated Institution	
	Name			
	Position		Address	
	Age	XX years old		
	Sex	Male/Female		
3.	Collaborative partner researcher:		Affiliated Institution	
	Name			
	Position		Address	
	Age	XX years old		
	Sex	Male/Female		

*Fill the age of the member at the date of submission.

(5) Schedule for Visiting

Name	Length of Visit and Number of Times (Tentative Plans Acceptable)	No. of Days
(Example) Jane Smith	One day x 3 times, one night/two days x 2 times, 3 nights/4 days x 1 time	11 days
		day(s)
		day(s)
Total Number of Days		day(s)

*Increase fields if more space is needed.

*Fill in the total number of days you plan to stay at NanoLSI. The total days should be less than **40 days** for regular application, and between **30 and 90 days** for the Extended Visiting Track.

*Visit should be completed by the end of January 29, 2027.

* Travel expenses cannot be covered for undergraduate students.

(6) Pledge for Student Accidents

Submit the original signed copy after adoption.

If any unexpected circumstances occur with the students of the collaborative partner researchers (graduate and undergraduate students) at NanoLSI, I will deal with them in good faith.			
Position, Department/Division, Affiliated institution of the student's supervisor			
Signature			
Name		Date	MM/DD/2026

*Refer to Application Guidelines "3. Others (f)."

*Skip this section if no student is participating in the research project team.

(7) Pledge for Submission of this Application

If you agree, check the following boxes. Submit the original signed copy after adoption.

<input type="checkbox"/>	All information provided in this application is accurate to the best of the applicant's knowledge.		
<input type="checkbox"/>	My research project team will carry out experiments safely and not bring dangerous items, chemicals, biological samples, etc. to NanoLSI.		
<input type="checkbox"/>	My research project team will carefully use Bio-SPMs, related instruments, and accompanying items.		
<input type="checkbox"/>	My research project team will not conceal results obtained through this collaborative research and will open them to the public.		
<input type="checkbox"/>	When the results based on this collaborative research are expected to be included in a manuscript, etc. of research papers, my research project team will discuss co-authorship or acknowledgement with NanoLSI host researcher and obtain agreement in advance.		
<input type="checkbox"/>	When the research papers based on this collaborative research are published, my research project team will report them to the person in charge of the Bio-SPMs Collaborative Research and send the copies of the papers as PDF files.		
Signature			
Name		Date	MM/DD/2026

(8) Research Project Description

Fill in the following items using text and Figures/Tables while citing references (Up to 2 pages for regular applications and 3 pages for Extended Visiting Track)

(i) Significance, Purpose, and Originality and novelty of the research project

(ii) Expected Results and Necessity of using the Bio-SPM

(iii) Research Plans and Methods

If available, give an overview of the status of sample preparations and the preliminary results. Moreover, estimate the number of measurement days.

(iv) Experience with Bio-SPM observations (optional)

If you have experience, mention the name of the microscope you used and give an overview of the results.

[References]

[1] Author(s), "Title," Journal, Vol., Page, (Year).

[2] Author(s), "Title," Journal, Vol., Page, (Year).

[3] Author(s), "Title," Journal, Vol., Page, (Year).