（Form 2）

Utilization Report for the ROIS Academic Assistant Program in FY 2022

Date of submission：MM/DD/YY

|  |  |  |
| --- | --- | --- |
| ■Researcher (Applicant) | | |
|  | Name |  |
|  | Sex |  |
|  | Institute |  |
|  | Laboratory |  |
|  | Position |  |

|  |  |  |
| --- | --- | --- |
| ■Academic Assistant | | |
|  | Name |  |
|  | Period of support | MM/DD/YY ～　　MM/DD/YY |
|  | Total days/hours |  |
| ■Content of support | | |
|  | | |
| ■Effect on applicant work-life balance by the allocation of Academic assistant | | |
|  | | |
| ■Proposal for the improvement of this program | | |
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