Form 3-1

Date (yyyy/mm/dd)

Letter of Approval

Prof. Shinichi Kuriyama,

Director, International Research Institute of Disaster Science (IRIDeS),

Tohoku University

Dear Prof. Kuriyama,

I hereby consent to the joint research to be conducted by the following individual affiliated with our facility as the Principal Investigator of the Disaster Resilience Co-Creation Research Project at IRIDeS, Tohoku University.

Notes

1. Principal Investigator
   1. Name:
   2. Job Title:
   3. Affiliation:
2. Title of the research
3. Research Period: From June 1, 2024 to March 31, 2025

Signature and Date:

Print Name

Job Title::

Affiliation:

Postal Address: