Sylff
The Ryoichi Sasakawa Young Leaders Fellowship Fund

Appendix 2

List of Newly Selected SYLFF Fellows

Please provide information on the newly selected SYLFF Fellows in the space below. This includes SYLFF fellows who received the fellowship for the second and third years. (Please make copies of this form if necessary.)

Student's Name:_____ □ male □ female
Surname Given name

Student's Address:_____

_____
City Post/Zip Code Country

E-mail address: _____

Field of Specialty:_____ □ Master's □Doctoral

Research Topic _____

Fellowship to cover: (month)_____20_____ to (month)_____20___

Amount of Fellowship / Grant:_____ (Currency)_____

Student's Name:_____ □ male □ female
Surname Given name

Student's Address:_____

_____
City Post/Zip Code Country

E-mail address: _____

Field of Specialty:_____ □ Master's □Doctoral

Research Topic _____

Fellowship to cover: (month)_____20_____ to (month)_____20___

Amount of Fellowship / Grant:_____ (Currency)_____