**Application from of the Travel Awards on ISMAB 2024**

Submission date: yyyy/mm/dd

To: President of JSAM

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| --- | --- | --- | --- |
| Name |  | Date of birth | yyyy/mm/dd |
| E-mail |  | Member Type | Student Member |
| Affiliation | Name of affiliation |  |
|  |  |
| Address | 〒 |
| Tel. |  |
| Home | Address | 〒 |
| Tel. |  |
| Event name | ISMAB 2024 |
| Organizer | The Japanese Society of Agricultural Machinery and Food Engineers |
| Title of presentation |  |
| Author(s) name |  |
| Type of presentation | Oral or Poster |
| Period of trip |  |
| Date of acceptance |  Yyyy/mm/dd |
| Amount of application(yen) | Total: |
| Travel fee (yen): |  | Participant fee (yen) |  |
| Whether travel and other expenses are paid by other organizations | 　 No　 Yes (Organization: ) |