（様式 10）

Evaluation by the Host Researcher

(1) Name of fellow:
(2) Title of the Research Project:
(3) Duration (for two years): / / - / /
(year) (month) (day) (year) (month) (day)

Please tick one of the following boxes and comment about the implementation of the research plan and result achieved by fellow of the Hiroo Kaneda Research Grant.

□Progress beyond expectation
□As was expected
□Less than expected, but certain degree of progress
□Others ( )

[Comment]

Name of Host Researcher:
Position and Affiliation:
Signature: