

館長	副館長	事務部長	情報サービス課長	専門員	閲覧第二係長	係員

Form 12

Application for Permission to Browse Rare Books

Date (YYYY/MM/DD):

To: Chief Librarian of the Tohoku University Library

Applicant Information

Name:

Signature:

Affiliation:

Position:

Address:

Phone:

I would like to request permission to browse materials based on the information provided below.

Notes

1. Purpose

.....

2. Name of materials

.....

3. Date/time of browsing

Date (YYYY/MM/DD): Time:

4. Sponsor

(Affiliation/position)

(Name)

5. Any other remarks

Note: 1. In general, the sponsor must be a professor, associate professor, or a full-time instructor at Tohoku University. If the applicant holds a position that meets the sponsor requirement, number 4 is not necessary.

2. If the sponsor is a person who was designated by the Chief Librarian Tohoku University Library or the head of the organization that the applicant belongs to, fill out the backside of the form as well.

整理番号	貴重
受付日	平成 年 月 日 ()

受付者	
-----	--