

(Form 1)

Receipt No. _____

Application for Access to Rare Materials

Date: _____

Attention: Director of Kyoto University Library

Applicant's name: _____ (seal)

Affiliation/Title: _____

Contact information:

Address: _____

Phone no.: _____

Fax no.: _____

I hereby request access to the materials listed separately as per the following conditions:

1. Purpose of access: _____

2. Date/Time of access: _____

3. Reference from instructor

(required if the applicant is a graduate or undergraduate student)

Please allow this student to access the materials requested.

Date: _____

University: _____

Faculty/Graduate School: _____

Instructor: _____ (Seal)