

## Study Carrel Application Form (Long Term)

Application Date :

Name		ID/Library ID Number	
Institute		Present Position	
Telephone		Email	
Topic of Research Plan			
Desired Tenure	<b>From _____ Year _____ Month to _____ Year _____ Month</b> <b>Total _____ months</b>  <b>If desired tenure is unavailable:</b> <input type="checkbox"/> (1) Contact the applicants, or <input type="checkbox"/> (2) Give up the application.		

I agree to comply with the regulations of the Joint Library of  
Humanities and Social Sciences, Academia Sinica.

Signature of Applicant :

Notes:

\*Please hand in this application form together with certificates in person.

\*For detailed information please contact: 2652-5284.

Below is for official only

研究小間編號：	鑰匙領用人簽收：
承辦館員： _____ 主管核章：	