

Study Carrel Application Form (Short Term)

Application Date :

| | | | |
|------------------------------|---|-------------------------|--|
| Name | | ID/Library ID Number | |
| Institute | | Present Position | |
| Telephone | | Email | |
| Topic of Research Plan | | | |
| Desired Tenure | From _____ Year _____ Month to _____ Year _____ Month Total _____ months If desired tenure is unavailable: <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： | |