The University of Aizu Library User Card Application Form

							Date:		
	ector of	ion Systems	and Te	chnol	ogy Center	5	SAMPLE		
Applicant Name:				Age:			Gender: <u>Male/Female</u>		
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Location Work Place	of	Address	Zip code:	Zip code: Phone:					
E-mail						Cell Phone)IIE•		
Occupation						☐ Student	(Academ	ic Year:)	
Application Category		□New □Renewal □Re-issuance							
Purpose of I so		□Viewing □Photocopying □Borrowing □Other (Please specify:)							
User Number									
⟨NOTICE⟩ Information collected here shall be used for purposes for proper management of the university, and shall not be used for other purposes unless there is a special reason.									
〈For Office Use Onl									
Approval	Direc		Director			Staff		Staff in Charge	
Confirmatio Qualification		$^{\mathrm{of}}$	f □ Driver's License □ ID Card (Employee Card・Student Card・Health Insurance Card) □ その他 ()						
Application Category		□New □Renewal □Re-issuance			User Number				
Date of Issue					Period of Validity		For one year after the date of issue		
Applicant's Signature for acknowledgment of receipt									
Remarks					1				