

CAMBRIDGE UNIVERSITY LIBRARY BETTY AND GORDON MOORE LIBRARY

For office use only:

Evidence of status attached? Yes / No

Today's date:

Please complete in block letters.

■ Name

Last name:

First name:

Middle name(s):

Title: Mr / Mrs / Miss / Ms / Dr / Prof (please circle one)

■ Status (Please circle one option and elaborate if necessary)

Visiting academic / Visiting student / Visitor undertaking personal research / Other

■ Affiliation and address

Employer / institution name:

Address:
.....
.....

Email address:

■ Use of library

Access to the Library is requested for the period from to

■ Signature

I understand that the information I have supplied on this form will be used by the Betty & Gordon Moore Library for administrative purposes within the terms of the Data Protection Act 1998 and will not be passed on to third parties.

I hereby apply for the privilege of admission to the Library. I hereby solemnly promise not to use this privilege to the injury either of the Library or the University of Cambridge.

Signed:

Date: