## Iran Public Libraries Foundation

## Request Form to use Manuscript resources

This Form Has Been Designed To Identify Researchers Who Intend To Use Manuscripts.

This Form Must Be Completed The Researcher.

This Form Is Invalid Without The Approval By Librarian Or Authorities.

	Province:		City:	• • • • • • • • • • • • • • • • • • • •					
A.Library specifications	Library degree:			Manuscript resources section included:  ☐ Less than ٩··copies ☐ More than ٩·· copies					
	Name and surname Natio				nal Code Library member:			Library member: ☐Yes ☐No	
B.Researcher profile	Field of study and Degree:				Last educational certificate				
	University or Institution Name				Occupational status:				
	E-Mail address:								
	Home address:				Phone number			Mobile number:	
	Work address:				Work phone number:			y.	
	TOTAL PRIORIE TIGINOOF.								
	Translation or authorship of the book:				Tra	anslate	an article:		
C. Research work									
	Text correction: Research			iect: otl			other:	other:	
D. Required resource(s) specifications  Title:				Author/Sci		or/Scriber:		Call Nubmer	
E. Commitment									
To respect moral and economic rights.									
To cite manuscripts in papers, books and etc. (refer to Title, and Call Number).									
To use for the purpose of scientific research.									
Not to give manuscript for other persons.									
Applicant's Signature									
date									
F. Confirmation									
Head of the Library:									
Documents and Manuscripts Expert:									