



LIBRARY CARD REQUEST

date

catalog language

Ms. / Mrs.

Mr.

family name

given name

title

research group

projectleader

e-mail address (institute)

@mpip-mainz.mpg.de

phone 06131 / 379 -

duration of stay

type of work

We hereby inform you that the above data will be stored in the library system for purposes of library management. Upon leaving the institute and returning the library card, the data will be deleted.

to be filled in by library staff

User ID: _____

Barcode: _____

library card returned: _____

account deleted: _____