



Application of research permission

Information about the researcher

Name:.....
Birth name:.....
Birth place, date:.....
Mather name:.....
Permanent address:.....
Postal adress:.....
Tel:.....
E-mail:.....
Workplace:
Research theme:.....
Research duration:
Place of research and name of the collection: Piarista Rend Magyar
Tartományá Központi Könyvtára
The aim of research (educational, scientific, public information,
commercial etc.):
.....

Research agreement

I, the undersigned, I declare that the above information is a full and true representation under the law, I declare further, that I understand, acknowledge and comply with the research requirements of the Central Library of the Hungarian Piarist's Order as well as those relating to copywrite laws.

I declare that I take responsibility for the care of the collections and related materials and further undertake to supply the Library with information about all publications form this research within one month, and to send the paper's one example.

Budapest,

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researcher's signiature

Research permission

I grant research permission based ont he above information.

Permission granted for research until :.....

Budapest,

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