

Request for access to the archives of the Institute for the History of Medicine at the Univ. of Bern (IMG)

Details of the applicant

Title, first name, surname:

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Institution:

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Address:

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Tel.:e-mail

I request to inspect the following archive holdings (signature/s):

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They are used for:

Scientific purposes non scientific purposes

These are

a) Study (tick as appropriate):

Bachelor Master Diploma thesis Dissertation Habilitation Research project

other

at the following institution:

Title of the study:

b) Publication (tick as appropriate):

Monograph Article in anthology Article in scientific journal Article in magazine Newspaper article

Online publication Film/Video other

Title of the publication (and of the anthology/journal/magazine/newspaper/website/broadcast station):

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Expected year of publication:

Comments:

.....

With my signature, I confirm that the above information is correct and that I have read and accepted the "Regulations for the use of the IMG archives".

I also undertake not to pass on the archive materials received from the IMG (whether as digital copies, paper copies, photographs or in any other form) to third parties and to destroy them after completion of the above project.

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Date

.....

Signature