

HOCHSCHULE ANHALT - University Library

Application at :

User-Number: 3329

Last Name:

First Name:

Title:

Department:

Date of birth:

Gender:

Female

Male

To be reached by mail at:

Semester-adress /Office

Home adress

Matriculation No.:

Semester-Adress / Office

c/o or Institution:

Street:

Postal Code, City:

Telephone:

Country:

State:

E-Mail:

Note:

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Street:

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Note:

Declaration:

I declare that I accept the terms of the Library Regulations. I consent to my personal details being stored, solely for the use of the electronic lending system and for notifications sent to me by the Library of the Anhalt University of Applied Sciences.

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Signature: