

# Study Carrel Application at Science Branch Library



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## To be filled out by the applicant *(in block letters)*

Name (Last, First) \_\_\_\_\_

CampusCard/Library Card \_\_\_\_\_ (HUHS.../HUUB...)

Home Address: \_\_\_\_\_

Email: \_\_\_\_\_

### I am *(please check)*:

Employee at Humboldt-Universität

Student at Humboldt-Universität in the \_\_\_\_ semester / subject:

Visiting scientist at: \_\_\_\_\_ *(please fill in and provide prove)*

### I need the study carrel for my *(please check)*:

Dissertation

publication

Bachelor-/Masterthesis

exam preparation

different reason: \_\_\_\_\_

### I need a carrel for the month of \_\_\_\_\_ *(please insert month)*

*The claim of the study carrel expires, if it is not occupied at the appointed time. Then you must fill out a new application.*

I have received, read and approved the policies that govern the use of study carrels.

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Signature**

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*Bearbeitung durch Bibliotheksmitarbeiter/in an der Theke **bei Erstausgabe** des Arbeitskabinenschlüssels.*

Anschrift abgleichen

Gebühren abkassieren

E-Mailadresse

Übergabe der *Arbeitskabine* \_\_\_\_\_ am:

\_\_\_\_\_  
Datum, Kürzel Bibliotheksmitarbeiter\*in

*\*Endgültige Rückgabe wird auf dem Belegungsplan quittiert*