



ARCHIVE REQUEST FORM

(Processing time : 48 hours max.)

If requesting **documents available on site only** (thesis, magazines, reports), **proof of identity shall be provided** (ID card or passport).

Date :

REQUESTOR

Name – First Name:

Phone Number/e-mail address:

Original school :

REQUESTED DOCUMENT

Book Magazine Thesis Other (please specify):

Author(s) :

Title :

Publication year (for magazines, specify volume and issue):

Book's call number :