

Special Permission Request Form for the Library Use

This form must be completed to request guest access to OIST Graduate University Library. Please fill in the following items and submit the signed form to the library.

I _____ request unregistered guest access to OIST Graduate University Library. By signing this form, I agree to abide by all university and library policies.

I accept that OIST registered users will be given priority usage for carrels, and any guests using carrels may be asked to give place in favor of registered users.

I understand that information I provide below will only be used to communicate with me.

Requester's name: _____ Date: _____

Requester's e-mail: _____

Library Use Only

Date received: _____ Effective Date: _____

Approver's Signature (Library Director):

_____ Date: _____