

**Library Patron Application**  
**Faculty of Management, Comenius University in Bratislava**

Patron Information (please print CLEARLY):

Last Name:.....First Name(s).....

Date of Birth (DD/MM/YYYY).....ISIC(ITIC) Card Number:.....

Street Address:.....

City & Zip Code:.....

Preferred Mailing Address (if different than above).....

Contact Phone:..... E-mail.....

School (Department):.....

Choose what applies:

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Master's Studies               | <input type="checkbox"/> Bachelor's Studies               | <input type="checkbox"/> Doctoral Studies (PhD) |
| <input type="checkbox"/> Master's Studies<br>(External) | <input type="checkbox"/> Bachelor's Studies<br>(External) | <input type="checkbox"/> Lecturer/Researcher    |

*I understand the library regulations and agree to abide by them. I understand that failure to abide by these regulations may result in the suspension of my borrowing privileges and/or expulsion from the library. I accept full responsibility for all materials checked out and for all charges associated with its use. I agree to pay promptly all fines and damages charged to me, and to give prompt notice of any change in my address.*

*By signing the library patron application I am giving permission and authorizing the library to process my personal data and records in compliance with Act № 122/2013 Coll.*

*Patrons are asked to have their library cards for all transactions. If my card is lost, stolen, or being used without my consent, I will notify the library immediately.*

Date:.....

Signature:.....