To Applicants

University of Tsukuba Library

Division of Academic Support

Reference & ILL Section

1-1-1 Tennodai, Tsukuba, Ibaraki 305-8577 Japan

Tel 029-853-2373, 2374

Fax 029-853-6021

Please complete the following documents and apply through your university library or public library. Upon receipt of the documents, we will place an order. It may take up to one month at the earliest for copied items to arrive, or longer depending on the condition and quantity of materials. We appreciate your understanding.

Applicants will be asked to donate one set of digitized DVDs to us and will also be responsible for the fee of the DVDs. (One set of DVDs will be donated directly to us from the vendor.)

Japanese Style Books Full Page Copy (Digitization/Printing) Application Form One copy

Attachment (Japanese Style Books Digitization/Printing Request Form) 　One copy

Notes

Attachment (Japanese Style Books Digitization/Printing Request Form):

* The vendor will send the invoice and copied items directly to the applicant, so please be sure to provide the address. If the invoice and the copied materials need to be sent to different addresses, please include those addresses as well.

※　Please refer to University Tsukuba Library’s website for the fees.

<https://www.tulips.tsukuba.ac.jp/lib/ja/visitor/waso> (in Japanese)

※　If you wish to use the copied materials for publication, etc., please submit the Library Material Use Application Form as well.

Japanese Style Books Full Page Copy (Digitization/Printing)

Application Form

Date

　　(Y /M /D )

To University Librarian of University of Tsukuba

Affiliation/ Department:

Name:

Phone number:

I would like to apply to full page copy of the following materials for educational or research purposes. I declare that:

1. I will donate one set of media with recorded data to University of Tsukuba Library.
2. I will not recopy any reproductions or copied items. I will not publish, reprint, reproduce, sell, transfer, or use as a replacement for any items without permission.
3. I will indicate that the original material is owned by the University of Tsukuba Library when I quote from reproductions or copied items.
4. I will take all responsibility for copyrights arising from this application.

Purpose:

Book title:

Publication year:

Call number:

Material ID: 100

Date

(Y /M /D )

Japanese Style Books Digitization/Printing Request Form

**Requested Material**

Book title:

Call number: Material ID: 100

**Media You Wish to Obtain** Please check one of the boxes in each bracket.

　　Digitized material (DVD): (□Necessary □Not necessary) Color: (□Black and white □Color)

Print from digitized data: (□Necessary □Not necessary) Color: (□Black and white □Color)

　　　　　　　　　　　　　　　　　　　　　　　　　 Size:(□A4 □B4 □A3)

**Invoice**

Name on invoice / statement of delivery:

Quotation: (□Necessary □Not necessary)

Billing address: (□Institution □Residence)

Address:

Name of contact person: 　　　　Phone number:

**Address** (□Institution □Residence)　※Not required if same as billing address

Address:

Name of contact person: 　　　　Phone number:

**Contact Information of the Library in Charge**

Name of contact person: 　　　　Phone number:

E-mail address: