

American Museum of Natural History  
Department of Library Services  
**Application for Library Privileges**

*Library Use Only* (Last updated Sept. 6, 2001)

Barcode Number: \_\_\_\_\_

Date: \_\_\_\_\_ Initials: \_\_\_\_\_

In order to qualify for Library privileges, you must have a valid Museum badge, and you must complete and return this form.

Applicant's Name: (please print) \_\_\_\_\_ Date: \_\_\_\_\_

Email: \_\_\_\_\_ AMNH Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

AMNH Division and/or Department: \_\_\_\_\_

Hiring Date: \_\_\_\_\_ Anticipated Employment End Date (if known): \_\_\_\_\_ Badge ID #: \_\_\_\_\_

Building Section: \_\_\_\_\_ Floor: \_\_\_\_\_ Room Number: \_\_\_\_\_

Choose the appropriate status category below to determine *whether you qualify for Full or Partial Privileges.*

(Full privileges means access to stacks, photocopiers, and current literature room. Full privileges also means the ability to borrow materials and request interlibrary loans. Partial privileges means access to stacks, photocopiers, and current literature room -- but no borrowing or interlibrary loan privileges.\*)

**Status categories which qualify for *Full Privileges*:**

- Permanent AMNH Employee with AMNH office space  
Provide Museum job title: \_\_\_\_\_
- AMNH Graduate Student (sponsored through the Dept. of Grants and Fellowships)  
Provide name of AMNH advisor: \_\_\_\_\_
- AMNH Post-Doctoral Fellow  
Provide fellowship title: \_\_\_\_\_
- Associate, Research Associate, or Field Associate with AMNH office space
- Curator Emeritus

**Status categories which qualify for *Partial Privileges*:**

- Permanent AMNH Employee without AMNH office space
- Temporary or contract AMNH staff
- Associate, Research Associate, or Field Associate without AMNH office space
- AMNH Volunteer
- Intern
- Student (circle one: high school -- undergraduate -- graduate)
- Visiting scientist

**NOTE! For partial privileges, provide sponsor/contact name:** \_\_\_\_\_

I have read the *Library Policies and Procedures for Museum Staff*. I understand that all Library materials are to be used in the Museum and that no material may be removed from Museum premises.

Applicant's Signature: \_\_\_\_\_

The applicant who has filled out this form has been issued a valid museum identification badge by this Department or Division, OR is a volunteer for someone in this Department or Division.

Departmental or Divisional Chair Signature: \_\_\_\_\_

**\*OPTIONAL – All approved applicants may also borrow materials under the name of one or more supervisors or sponsors if the supervisor or sponsor has full privileges and will sign below, agreeing to the stated conditions.**

**For the Supervisor/Sponsor:**

I want the applicant to be able to borrow materials on my behalf (under my name), therefore I agree to take financial responsibility for replacing any materials lost by the borrower that were charged out under my name, and I will notify the Library when and if the applicant's affiliation with me changes or ends.

Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Extension: \_\_\_\_\_

(Additional supervisors/sponsors who agree to these conditions can sign on the reverse side of this form.)