貸出券交付申込書(様式1)

**貸出券交付申込書（教職員・その他）**

注）太枠内を記入して下さい。

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| 所属館：山の畑、川澄、田辺、北千種 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 貸出券番号 | | | | | | |  | | | |  | | | |  | | |  | | |  | | | |  | | |  | |
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| 名古屋市立大学総合情報センター長　様   |  |  |  |  | | --- | --- | --- | --- | |  | 姓 (Family name) | 名 (First name) |  | | ふりがな |  |  |  | | 氏　名 |  |  |  |   　次のとおり貸出券の交付を申し込みます。  　 　　　　□新規　　□更新:MyLibraryパスワード再通知( 要・不要 ) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 職員番号等 | | | | | s | | | **1** | | |  | | |  | | |  | | |  | | |  | |  | | f | | **5** |  |  | |  | |  |  |  | p | | **6** | |  | |  | |  |  | | |  |  | | a |  | |  | |  | |  |  | |  |
| 任期・有効期限　　：　　　　　　年　　　　月　　　　日 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | h |  | |  | |  | |  |  | |  |
| 所　属 | ○で囲んでください。  11.医学部･医学研究科　12.看護学研究科　13.病院　31.薬学部･薬学研究科  41.経済学部･経済学研究科　42.人文社会学部･人間文化研究科　43.総合生命理学部･理学研究科  44.データサイエンス学部・データサイエンス研究科　71.芸術工学部･芸術工学研究科  91.総合情報センター　92.事務局　93.高等教育院・教養教育 99.他大学等  ※上記以外の事務室は92．を選択してください。 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | 講座・学科・病棟等 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | [内線] | | | | | | | | | | | | | | | | | | | | |
| 利 用 区 分 | ○で囲んでください。 　　　　　　　　　　　 （ \*は、パスワード通知対象外 ）  301.職員(契約職員含む) 302.再雇用（嘱託）\*401.教員 \*402.特任教員 \*407.病院助教  413.非常勤講師 414.名誉教授 415.客員教授・准教授 416.臨床教授・准教授 417.語学講師  418.連携推進教員 421.研修医 422.シニアレジデント 428.臨床研究医 429.非常勤医師  450.高度医療教育センター教員 501.特別研究員 502.受託研究員 503.研究員 504.客員研究員  505.派遣研究員 506.民間等特別研究員 \*601.講座　\*801.学外者（決裁許可） | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 住　所 [Address] 　※アパート・マンション名・部屋番号もお書き下さい。 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | e-mail | | | | | | | | | | | | | | | | | | | | |
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| 棟　　　　号 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | （　　　　）　　　－ | | | | | | | | | | | | | | | | | | | | |
| **[勤務先・連絡先]** ※利用区分の 413.非常勤講師 429.非常勤医師 501.特別研究員　502.受託研究員　503.研究員  504.客員研究員　505.派遣研究員　506.民間等特別研究員 　に該当する方はご記入ください。 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 名称：　　　　　　　　　　　　　　　　　　　　　　　身分： | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 所在地：〒 | | | | | |  | | |  | | |  | | | - | | |  | | |  | | |  | |  | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| TEL （内線） | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 備　考： | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 病院カード番号   |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | | **7** |  |  |  |  |  |  |  | | | | | | | | | | | | | | | | |
| MyLibraryパスワード通知　 □済 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 証明書 | | | | | | |  | | | | | | | | | 受付者 | | | | | | | | |  | | | | | | |

　記載された個人情報は、図書館業務(My Library・督促等の連絡)以外に使用しません。

(2025.4)