Deutscher Bundestag



Application to use the German Bundestag Library

Surname:		First Name:
Maiden Name:		Nationality:
Date of Birth:		Place of Birth:
Address:		
Telephone/Fax:		Email:
Identity No.:		Passport No.:
Permission to use the library is requested for the following period(s)		
from:		to:
from:		to:
from:		to:
Purpose for using the library (dissertation title / research project) The assignment is supervised by: (please attach certificate)		
The Bundestag Library groon (date):	ants permission for researc	ch to be carried out at the following time(s): by:
Please ensure that the application form is legibly filled out and submit it, preferably 14 days prior to your visit, to the address stated below. The library will advise you of approval of your application either in writing, by telephone or by email. You will be issued a visitor's pass upon presentation of your identity card / passport at the entrance to the Marie-Elisabeth-Lüders Building, Adele-Schreiber-Krieger-Str. 1. Should you have any queries, please don't hesitate to contact us by phone or email (details below):.		
Opening hours		
In sitting weeks:	Monday to Thursday: Friday:	9.00 – 8.00 pm (6.00 - 8.00 pm: Reference desk closed) 9.00 – 4.00 pm (2.00 - 4.00 pm: Reference desk closed)
In non-sitting weeks:	Monday to Thursday: Friday:	9.00 – 5.00 pm 9.00 – 4.00 pm (2.00 - 4.00 pm: Reference desk closed)
Deutscher Bundestag Bibliothek Benutzung und Informati Adele-Schreiber-Krieger-S 10117 Berlin Email: information.bib		

Tel.:

Fax:

(030) 227 - 3 26 26 (030) 227 - 3 63 62