

Application Form for Loan Requests of National Chiang Kai-shek Memorial Management Office

Requesting Unit/Applicant		Date of request	MM/DD/YY
Purpose of loan			
Contact No.	<ul style="list-style-type: none"> ● Address: _____ ● Tel. No./Fax No.: _____ ● Email: _____ 		
Collection No.			
Title of Collection			
Author		Number of items	
Description of the status of the collection			
Photos of the collection			
Requesting Unit	Collection Unit	Deputy Commissioner	Commissioner

Note:

1. The Form shall be recorded by the Collection Unit (original copy) and Requesting Unit (duplicate).

2. The Form shall be completed by the collection staff.