

Archive Visitor Declaration Form

| Name: |
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| Address: |
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| |
| POST CODE |
| Telephone: |
| Email: |
| Purpose of Visit: |
| Declaration: |
| I have read and agree to adhere to the Reading Room Guidance. |
| Signed: |
| Date: |
| This information will only be used to provide a record of who has accessed the reading room and the purpose of the visit. It also allows the University to contact you if there is a query about the archive records you have accessed when you visited. Part of the information is used to calculate anonymised visitor statistics, including where visitors to the Reading Room have travelled from. |
| This information about you will be kept for 2 years from the date of your visit. If you have any queries regarding your information, please ask the Archivist about Abertay University's Data Protection Policy. |