

## Request form

\* Required

* Personal data		
Last name, first name, title:		
Address:		
Addices.		
Tel.:		
E-mail:		
,		
I am researching on behalf of:		
Name / Institution:		
Address:		
Addi ess:		
Tel.:		
E-mail:		
E-mait:		
* Purpose of use:		
Science:	♦ Habilitation ♦ Dissertation ♦ Master	
, 633,133,	♦ Bachelor ♦ State examination	
	♦ Seminar paper → Other scientific work	
	Subject:	
	Subject:	
	For university qualification projects: scientific	
	supervisor, university:	
≬ Knowledge transfer:	♦ Press ♦ Television/Film ♦ Exhibition	
	♦ Catalogs ♦ Social Media	
	♦ Other:	
≬ Provenance Research:		
(Context/Personal details/Work		
details/Collection information)		



* User request for the collection (please	
be as precise as possible) with signature	
(Online: https://zadik.uni-	
koeln.de/homepage/default.aspx?s=363)	
* Requested date (processing of search	
requests must be submitted at least two	
weeks before the requested search date)	
Research with publication intention	Publication medium:
	Publication location:
	a distribution to cation.
	Publication date:
Research without publication	
I have already worked at ZADIK:	≬ yes ≬ no Year:
I agree with the announcement of the	
work topic and my name to other users:	≬ yes ≬ no
I agree that a copy of my work, which is not or	
not initially intended for publication, may be made	
available to other users via the ZADIK library:	≬ yes ≬ no

I have taken note that the personal data of this research request form and the information about my use and the documents I have ordered will be permanently stored in the database/on the server of ZADIK for documentation purposes. I have taken note of the current ZADIK user and fee regulations.

(Place, date, signature)

Please return this form to:

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University of Cologne

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D-50670 Cologne

