

Research permit

Name:
Permanent address:
ID/passport number:.....
E-mail address/Telephone no.:.....

Research topic, research subject:

Place of the research, name of the collection:

Purpose of the research (educational, academic, general interest, commercial, other):.....

Declaration

Aware of my legal liability, I declare that the above details are true and correct.

I commit to follow, during the research and use, the provisions of the applicable laws, especially on data protection and copyright, and the research regulations of the Budapest History Museum.

By signing this declaration, I, the undersigned, accept that the Budapest History Museum (data controller) will handle my personal data provided above for the extent and duration required for compliance with a legal obligation¹ to which the controller is subject [Article 6(1)(c) of the GDPR].

By signing this declaration, the researcher commits to send within 3 months, free of charge, 1 copy of the publication, thesis or other work created as a result of research conducted at the Budapest History Museum to the Budapest History Museum –
Museum – (*name and address of the collection*) in the format (electronic or hard copy) agreed to with Collections staff.

Budapest,

.....

Researcher

¹ Section 4 of Government decree 47/2001 (III. 27.) on research in museological institutions

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E-MAIL: INFO@BTM.HU

Recommendation by head of collection/department/institution:

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Valid for the stated research subject until

Budapest,

.....

Approver

Made in 2 copies, to be received by:

1. the researcher
2. the approver