

## Research permit request for the scientific study of BHM Aquincum Museum collection materials

in accordance with Government decree 47/2001. (III. 27.)

Applicant's Name<sup>1</sup>: .....

Telephone, e-mail: .....

Address (of institution): .....

ID number: .....

Purpose of the research: .....

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Research subject: .....

.....

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.....

Date:

.....  
Applicant

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<sup>1</sup> By signing this form, the Applicant gives his/her permission for the personal information provided here to be recorded and handled by the BHM Aquincum Museum for the purposes and duration specified in §4 of Government decree 47/2001 (III. 27.) on research in museological institutions.