The Hong Kong Academy for Performing Arts Libraries

Library Borrowing / Reading Card Application Form (Former Full-Time Staff Member*)

- 1. Complete Part I in BLOCK Letters and return the form to the Academy Library.
- 2. Years of service in the Academy to be certified by Human Resources Office.
- 3. Settle payment for Deposit (for Borrowing Card only) at the Cashier of the Finance Department. Cheque should be made payable to "The Hong Kong Academy for Performing Arts".
- 4. Return the completed form with payment receipt (if any) to the Academy Library.

Library will inform you on photo-taking arrangement.

If you have any question, please call 2584-8510.

Please refer to overleaf for personal information collection statement.

* To be eligible to apply, applicant must have worked <u>FULL-TIME</u> for the Academy 10 years or above.

Part I		
Application for a : Borrowing Card (\$500 refundable deposit is required) OR Reading Card		
Surname: (Prof, Dr, Mr, Miss, Ms, Mrs)	First Name:	
Name in Chinese (if any):	Academy ID No.:	
Mobile (preferred) / Home phone number:		
Address:		
Email Address:		
Declaration		
I understand that when using electronic resources provided by the Academy Libraries, I shall comply with the terms and		
conditions of use of these electronic resources. I am fully responsible for any legal consequences concerning the terms and condition that may arise.		
I undertake to indemnify the Academy any liability incurred should a dispute concerning copyright infringement arise.		
I understand that I shall be responsible for any loss or damage of the library materials loaned and shall be charged the cost of replacement plus accumulated fine. The Academy Library reserves the right to deduct unsettled amount from my		
deposit or take further action to recover the cost.		
Signature	Date	
For Human Resources Use I certify that the above person had been a full-time employee of the Academy for over 10 years.		
Service Duration: From// to/ to// dd mm yyyy dd mm yyyy		
Verified by: Designation:		
	PTO	
CUT HERECUT HERE		
To : Cashier, Finance Department		
From : Academy Library		
Please receive the following payment from:		
(Name)	(Academy ID No)	
DLGS Library Card Deposit \$5	00 Library Staff Signature:	

Personal Information Collection Statement

The personal data provided in this form will be used for processing your application for a library card, providing access to library facilities and services, compiling library statistics, and maintaining your record. Your data may be shared with relevant departments (e.g. Accounts Office, Registry) of the Academy solely to resolve outstanding fines or other obligations. Provision of personal data is voluntary. If you do not provide sufficient information, the Library may not be able to process your application or contact you. Outdated data will be destroyed in accordance with the Library's retention policy. To access or correct personal data held by the Library, please contact us by email at library@hkapa.edu.

For Office Use Only		
<i>New Application</i> □ HKID Checked		
Receipt Attached (if any)		
Issue Photo Taking Slip		
Renewal - With Library card [Former Full-time Reading / Borrowing]		
HKID Checked		
Receipt Attached (if any)		
Collect Old Library Card (Card will be ready in 2	working days)	
Renewal - Without Library card [Former Full-time Reading / Borrowing]		
Check System for relevant "Card ID Note"		
Receipt Attached (if any)		
□ With relevant note, treat as Lost Card \rightarrow issue "(ard Replacement Form	
Without relevant note, Issue Photo Taking Slip		
Checked by:Date:		
To be filled by LAI(Circ):		
Patron Barcode:		
Expiry Date:		
Data file sent to FSC on:		
Processed by :		
Access Control updated by :		
Door Group activated by:	Approved by:	
	(Librarian)	