

**RESEARCHER  
APPLICATION FORM**

ID card No:

**BASIC INFORMATION (MANDATORY)**

_____ NAME		_____ SURNAME	
_____ DATE OF BIRTH		_____ PLACE OF BIRTH	
PERMANENT: ADDRESS	_____ STATE	_____ CITY	_____ STREET / NUMBER
_____ CITIZENSHIP		_____ ID/PASSPORT NUMBER	
_____ LOCAL ADDRESS IN ZAGREB		_____ TELEPHONE / E-MAIL	

**ADDITIONAL INFORMATION (NOT MANDATORY)**

_____ INSTITUTION OF EMPLOYMENT / INSTITUTION OF EDUCATION / OTHER				
_____ OCCUPATION	_____ PROFESSIONAL TITLE			
PURPOSE OF RESEARCH:				
PRIVATE <input type="checkbox"/>	OFFICIAL <input type="checkbox"/>	PHD THESIS <input type="checkbox"/>	GRADUATE THESIS <input type="checkbox"/>	OTHER KIND OF PAPER <input type="checkbox"/>
_____ I AM WORKING ON BEHALF OF THE FOLLOWING INSTITUTION				
RESEARCH TOPIC: _____ _____				
FONDS/COLLECTION THAT I SHALL USE: _____ _____				
I INTEND TO PUBLISH MY WORK: YES <input type="checkbox"/> NO <input type="checkbox"/> (If YES, please specify where) _____				

## OBLIGATIONS STATEMENT

1. I confirm that I am familiar with terms and conditions of using archival records, as well as with rights and obligations of records' users as specified by the Law on Archival Records and Archives (*Narodne novine*, no. 61/18), Criminal Law (*Narodne novine*, no. 125/11), Regulations on Using Archival Records (*Narodne novine*, no. 67/99) and Regulations on Using the Croatian State Archives' Reading Rooms. I pledge to uphold the rules and limitations prescribed by these rules.
2. I confirm that I am familiar with the fact that by researching and using archival records it is possible to access personal information or other information unavailable to the public i.e. whose publication or access by unauthorized persons could violate rights or interests of third parties, including copyright and other related rights, as well as other rights and values guaranteed by law. I pledge to use the archival records or copies of the documents and the information contained therein in accordance with the applicable archival regulations and personal data protection regulations and that I will not use them in a manner that could harm the rights or interests of third parties or public interests.
3. I am familiar with the fact that the Croatian State Archives does not accept any responsibility for damage of third parties as the result of the user using archival records, copies or information from the records. I pledge under material and criminal responsibility that in case of the violation of rights and interests of third persons due to publishing or by making the records available to unauthorised parties I myself shall take full responsibility towards third persons and I shall not in any way question the fact that the Croatian State Archives is free from any responsibility for such violations of rights or interests of third persons.
4. I pledge to treat the archival records that I shall be given access to with care, making sure that I do not damage and misplace them or in any other way harm their integrity.

\_\_\_\_\_  
USER'S SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
USE APPROVED BY

\_\_\_\_\_  
DATE