

Application form for permission for archival research in the Engelsberg archive

Name:

Address:

Occupation:

E-mail:

Academic title, if any:

Telephone:

Institution/organization:

I wish to access the following archival material (describe in as much detail as possible: founder of archive, time period, document categories, etc.):

Use of archival material (indicate in as much detail as possible the purpose of research and how the information will be used):

Send the completed form, with e-mail address, to Nils Johan Tjärnlund <nils.johan.tjarnlund@nordstjerman.se>