Application for an ALCID Card

Please issue me with an ALCID card which will, I understand, provide me with access, but not borrowing rights, to the Libraries of
All Hallows College; Dublin City University; Dublin Institute of Technology; Dublin Institute for Advanced Studies; Mary Immaculate College, Limerick; Mater Dei Institute; National College of Art & Design; NUI Galway; NUI Maynooth; Royal College of Surgeons in Ireland; Royal Irish Academy; St. Angela's College, Sligo; St. Patrick's College, Drumcondra; Trinity College Dublin; University College, Dublin; University College Cork; University of Limerick; University of Ulster
on production of the ALCID Card and my DCU ID.

I certify that I am eligible for an ALCID card as a member of academic or academic-related staff or as a registered student for a Masters degree at DCU.

I agree to familiarise myself with and observe the regulations of the libraries which I visit using my ALCID card and accept that any reported breach of regulations in the other participating libraries may lead to exclusion from the ALCID scheme and/or the imposition of penalties equivalent to those which would apply for similar breaches of the regulations.

I understand that possession of an ALCID card does not give me borrowing rights outside my home library.

Signed: ____________________________ Date: ________________

Section A (Applicant to complete):

First Name____________________ Surname: _____________________

Status: Please tick
Academic ☐
Academic Related ☐
Doctoral ☐
Masters Research Student ☐
Taught Masters Student ☐

Department/School __________________________

DCU ID card Number __________________________ Expiry Date of ID card __________

SECTION B (For completion by Library Staff)

DCU ID card checked by_____________ ALCID Card issued by __________

Date ________________