**Interview No.** ………………….

**Interview Transcript Approval**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name and surname: |  | | | |
| Date and place of birth: |  | | | |
| Permanent residence address: |  | | | |
| Interview No.: |  | |  |  |
| Edited transcription, version dated: | |  | |  |

As a narrator of the interview I have given to the Jewish Museum in Prague within the oral history project I hereby confirm with my signature below that I agree with the wording of the edited transcript of the interview in the above version as its final form intended for the purposes of the Jewish Museum in Prague.

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| --- | --- | --- | --- | --- | --- |
| In |  | on |  |  |  |
|  | | | |  | (signature) |