Research Request Form

Name _____

Date _____

Institutional or Tribal Affiliation _____

Address _____

Telephone _____ Email _____

Nature of Research:
- ☐ Basic Research
- ☐ Exhibition
- ☐ Publication
- ☐ Student Research
  - What class? _____
  - For dissertation / thesis? _____

Research Topic _____

Title of Publication/Exhibit _____

Additional Researchers to Accompany Applicant _____

Materials Requested:
- ☐ Archaeological Artifacts / Specimens
- ☐ Historic Objects
- ☐ Catalog Records
- ☐ Archives
- ☐ Other _____

Requested Date(s) of Access _____

Office Use Only:

Date of Response: _____ Name of Staff Member: _____

Information Given: _____

_____

Collections Access ( ) Approved ( ) Not approved Reason _____

Collections Used (Accession #, Location) _____

_____

Time Spent on Request: _____

How Researcher was Contacted: _____

Additional follow-up needed: _____

If yes, specify: _____