Kelsey Museum of Archaeology University of Michigan 434 S. State St. Ann Arbor, Michigan 48109

COLLECTIONS ACCESS REQUEST FORM

Telephone: (734) 764-9304

Fax: (734) 763-8976

Please note: a minimum of three weeks advance notice is required for access to any collection. Requests to access a large number of artifacts require additional notice. Date _____ Name/Organization Address/Telephone/email Reason for Access: Publication Identification/Comparison Loan Request Commercial Venture Academic Research Other Explanation Access Requested: Study Stored Objects _____ Photograph Objects _____ Draw Objects Other Dates Available for Your Visit: Additional Dates Available:
(Please add additional dates In case your original dates are not available) I agree to exercise due care in handling any object(s) in the Kelsey Museum of Archaeology collections and to assume full responsibility for any damage, accidental or otherwise, that may result from my use of collections material. Before working with collections, I will be shown the proper procedures for handling artifacts. No work will be conducted on the Kelsey collections without prior approval from the Kelsey Collections Staff. I understand that approval to study the collections does not give me any rights to publish or use photographs of the collections, and that a separate request must be made in order to publish or use photographs from the collection. I also understand the Kelsey Museum has the final approval regarding when and how Kelsey collections, archives, and photographs will be used. I agree to abide by all Museum policies and rules. Requestor's Signature _____ Date _____ For Staff Use Only Type of Access Granted _____ Date Received Access Approved _____ Not Approved _____ Conditions _____

Collections Staff Signature _____

Reisey Museum Conections Access Request Form (continued)
I am requesting access to the following artifacts, archives, or photographs: (please be specific - continue on additional sheets if necessary)
Requestor's Initials
Staff Initials

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