Request for Curation Form

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Project Information

Collection Name

Brief Description of Collection

Project Area
State and County(ies)

Official Site Number(s)

Type of Contract Requested ☐ One Time Fee ☐ 10-Year Renewable ☐ Other:

Permit(s) or Other Approvals
Attach if Applicable

Estimated Date for Delivery (to the Waring Laboratory)

Collection Information

Has the Project Been Completed?
If yes, complete Collection Summary Form ☐ Yes ☐ No

Estimated No. of Boxes:
15"x12.5"x10"
Artifact: **Document:**
Other:

Material Types Anticipated
Ex: Lithics, metal, bone, etc.

Legal Owner of Collection
Please provide: Agency Name, Contact Name and Title, Mailing Address, and Telephone Number.

Person Requesting Curation

Date of Request

Name and Title

Affiliation

Mailing Address

Telephone **Email**

Person Authorized to Sign Curation Contract

Name and Title

Affiliation

Mailing Address

Telephone **Email**

Principal Investigator Information

Name and Title

Affiliation

Mailing Address

Telephone **Email**

Archaeologists are encouraged to consult with Waring Laboratory personnel early in the planning stages of their archaeological research projects regarding processing issues and any questions regarding our curation of collections. Final Acceptance of materials for curation is contingent upon compliance with 36CFR79 and the Waring Laboratory's Standards for Archaeological Collections