INTENT TO CURATE

Curation at the William S. Webb Museum of Anthropology is requested for the following collection:

PROJECT NAME ___________________________________  DATES ________________________________

LOCATION ________________________________________________

SITE NUMBERS (if known) ______________________________________

SCOPE OF WORK ________________________________________________
______________________________________________________________________________

PRINCIPAL INVESTIGATOR ________________________________________

PHONE______________________________ EMAIL______________________________

AGENCY/CONTRACTOR ____________________________________________

ESTIMATED SPECIMAN TYPE & COUNT ________________________________

The undersigned acknowledges that he/she had read and agrees to comply with the Standards for the Preparation of Archaeological Specimens and Documents for Curation at the Webb Museum.

______________________________________________________________________________

Name/Title        Signature    Date

The William S. Webb Museum of Anthropology, University of Kentucky, agrees to serve as repository for the collections recovered during the project listed on this form. Final accession into the Museum is contingent upon compliance with the Standards for the Preparation of Archaeological Specimens and Documents for Curation at the Webb Museum.

______________________________________________________________________________

Name/Title        Signature    Date