

	<b>Archivist          Research Request          Form</b>	Date of Request
		Staff Name
<b>Researcher name</b>		
<b>Institutional affiliation</b>		
<b>Contact Information</b>	Phone	
	Fax	
	Email	
<b>Purpose of Research (please check one)</b>	<input type="checkbox"/> Administrative <input type="checkbox"/> Building History <input type="checkbox"/> Genealogy <input type="checkbox"/> Thesis or dissertation <input type="checkbox"/> Article or Book	<input type="checkbox"/> Environmental Site Audit <input type="checkbox"/> Special Event <input type="checkbox"/> Other (please specify)
<b>Nature of Enquiry</b>		
<b>Information found</b>		
Checked  <input type="checkbox"/> Subject files <input type="checkbox"/> Building files <input type="checkbox"/> People files <input type="checkbox"/> Photograph db <input type="checkbox"/> Photograph indices <input type="checkbox"/> Cemetery records <input type="checkbox"/> Company files <input type="checkbox"/> Archival finding aids <input type="checkbox"/> Other (pls list)	<b>Results</b>	