

Collection Visit Request Form



Contact Information:

Name/Title:

Institutional Affiliation:

Address:

Email address:

Phone:

Type of Research/Project Description:

Please provide a brief description of your research (attach additional pages if necessary). A detailed description of methodology, previous research using that methodology, and a list of objects to be analyzed.

Preferred Date(s) for Research Visit:

Images:

Do you plan to photograph, scan, illustrate, replicate, and/or publish any object(s) you are requesting for study? Yes_____ No_____

The visitor shall acknowledge the SPM as the source of the objects in all written and electronic publications and reports or voucher numbers where available. The visitor will supply the SPM with copies of the publications resulting from the use of the objects.

Your signature below indicates that you have read and agreed to the guidelines for access to the SPM collections.

Signature_____Date_____

Authorized for the SPM by:

Name: _____ Signature_____ Date: _____

Collections Information

Will the research analysis damage or destroy any portion of the object? Yes ___ No_____

If yes, please fill in the form for Invasive Sampling for Genetic or Non-Genetic Resources.

Please email the completed form(s) to:

Dr. Nadja Pöllath, curator; poellath@snsb.de