Appointment Request for Michener Art Museum Library & Archives

_________ Michener Library                                       ________ Michener Archives

Name ____________________________________________  Date __________________

______ Michener member      _____ researcher

Phone (home/work) ______________________ (cell) ________________________________

e-mail ________________________________________________________________

Research topic ___________________________________________________________

Purpose of research _______________________________________________________

________________________________________________________________________

Conditions for use

1. Documents may not be removed from the reading room without permission.
2. Materials must be kept in their folder and in their original order.
3. Materials to be photocopied should not be removed from folders.
4. Pens are prohibited; pencils may be used for note taking.
5. Briefcases, coats, smoking, eating and drinking are prohibited.
6. The James A. Michener Art Museum reserves the right to restrict access to or
   photocopying of archival materials.
7. All references to materials in the archival collection should include archival number,
   title and acknowledge “James A. Michener Art Museum Library & Archives.”
8. The museum holds literary rights only for material created by museum personnel or
   given to the museum with such rights specifically granted. For all other material,
   literary rights, including copyright, belong to the authors or their legal heirs and
   assigns. Researchers are responsible for obtaining permission from rights holders
   for publication and for other purposes where stated.

Application Agreement

I have read and agree to the above conditions for use of the James A. Michener Art
Museum Library & Archives.

Signature _____________________________________________  Date ___________

Request taken by: _________________________________  Date ___________

Request Granted: ______________   Appointment Date & Time: ___________________