

REQUEST TO DEACCESSION MUSEUM OBJECTS

Reference No. (Mimsy Disposal Record Number): _____

COLLECTION INFORMATION

Department/Unit: _____

Name of Registered Collection: _____

Name of Academic Curator: _____

Email: _____

Phone: _____

Address: _____

DESCRIPTION OF OBJECTS TO BE DEACCESSIONED

Total number of objects: _____

Attach a list of object(s) to be deaccessioned, with the following information for each object included:

- Accession Number
- Object/Item/Specimen Name
- Object Title/Scientific Name/Classification
- Mode of Acquisition and Date
- Appraised Value
- Reason for Deaccession
- Proposed Method of Disposition

Attach other related documentation (i.e. committee meeting minutes; Certified Cultural Property documentation and date; Cultural Property Control Group Number, etc.)

Curator (Please Print)

Signature

Date

Department Chair (Please Print)
(Authorized Representative)

Signature

Date

Please forward completed forms to: Executive Director, Museums & Collections Services, Ring House 1.