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6. Applicant information:

Name: ______________________________ Email: ____________________________
Phone: _____________________________ Fax: ________________________________
Address: __________________________________________________________________

Institutional Affiliation: __________________________ Phone: ___________________ 
Fax: ____________________________ Email: ______________________________
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Format(s) in which material will be used: ________________________________

Brief description of project and use of Special Collections materials:
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The Material will be used for: (check one)

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☐ Scholarship

☐ Research

List of photographs requested: _________________________________________
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____________________________________________________________________

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Signature: ________________________________ Date: ____________________
(Applicant)

Signature: ________________________________ Date: ____________________
(Special Collections)