RESEARCH REQUEST

Forward this Request to:
Abigail Lawton, Curator of Collections
Oneida Community Mansion House
315-363-0745 ext. 4228
alawton@oneidacommunity.org

I. Applicant Information
Last Name: _______________________ First Name: _______________________
Title: ____________________________________________________________
Address: __________________________________________________________
City: _____________________________
State: ______________ Zip: ______________
Country: ____________________________
Phone: _____________ Fax: __________ E-mail: ____________________________
Student: ___ Yes ___ No
If yes, a signed letter from advisor/supervisor is required
First Visit: ___ Yes ___ No
Dates of visit: ______________________

II. Purpose of Visit (check one or more and add description.)
___ Exhibition loan / subject: _____________________________________________
___ Academic research / subject: __________________________________________
___ Commercial publication / title: _________________________________________
___ Other / description: _________________________________________________

III. Collections / documentation to be studied (check one or more and add description.)
___ Collections / description: _____________________________________________
___ Archives / description: ______________________________________________
___ Photographs / description: ____________________________________________
___ Library / description: ________________________________________________
___ Other / description: _________________________________________________

Signature: _____________________________ Date: ______________

170 Kenwood Avenue, Oneida, New York 13421