



Albion College

Archives & Special Collections

Researcher Registration Form

Name _____ Date _____

E-Mail Address _____ Phone _____

Mailing Address _____

Specific Subject of Interest _____

Researcher Affiliation:

Albion College (check one)

- 1. Faculty – Department Name _____
- 2. Student – Department Name _____
- 3. Staff – Department Name _____

Other College/University Affiliation (check one)

- 1. Faculty – Institution/Department Name _____
- 2. Student – Institution/Department Name _____
- 3. Staff – Institution/Department Name _____

Non-College Status (check one)

- 1. _____ Albion Community
- 2. _____ WMC Staff
- 3. _____ Business
- 4. _____ WMC Member
- 5. _____ Genealogy
- 6. _____ Other _____

Referred to Albion College Special Collections through:

- 1. _____ Albion College Library Home Page
- 2. _____ College Office/Department
- 3. _____ Albion College Online Catalog
- 4. _____ OCLC
- 5. _____ Albion College Special Collections Page
- 6. _____ Footnote/Citation
- 7. _____ Personal Contact
- 8. _____ Published Guide
- 9. _____ Class Instruction
- 10. _____ Other _____

My research will result in:

- 1. _____ Paper
- 2. _____ Book
- 3. _____ Honors Thesis
- 4. _____ Online source/site
- 5. _____ Article
- 6. _____ Other _____

In lieu of publishing fees, the Albion College Archives and Special Collections asks that the author donate a copy of his/her publication to the Albion College Library.

I have read the **Rules and Regulations** for the Albion College Archives and Special Collections and agree to abide by the rules for use of the historical documents and artifacts therein:

Signature _____

Date: _____

Archives Staff (Initials) _____

Entered in database (Staff Initials): _____