DEACCESSION RECOMMENDATION

Category:  □ Archives  □ Artifacts  □ Library  □ Photos  Date:  _________________________

Submitted by:  ____________________________ (name and title)

Object ID Number:  _______________________  Donor’s Name:  ____________________________

Object Name/Description:  ____________________________________________________________

Current Condition:  □ Excellent  □ Good  □ Fair  □ Poor

Comments:  ____________________________________________________________

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Documentation:  □ Yes  □ No (if no, why not?  ____________________________)

Attachments:

□ Donor Form
□ Photograph
□ Catalog Record
□ Other:  ____________________________

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Deaccessioning Criteria:

1. The Museum fully and legally owns the archival material(s), artifact(s), library material(s), or photograph(s).  □ Yes  □ No

2. The archival material(s), artifact(s), library material(s), or photograph(s) has been accessioned into the Museum’s collection for at least four years.  □ Yes  □ No

3. Meet at least one of the following:
   a. The archival material(s), artifact(s), library material(s), or photograph(s) is outside the scope of the statement of purpose of the Museum and its acquisitions policy.  □ Yes  □ No
   b. The archival material(s), artifact(s), library material(s), or photograph(s) is a duplicate of those already held within the collection.  □ Yes  □ No
   c. The archival material(s), artifact(s), library material(s), or photograph(s) has deteriorated beyond usefulness, or has failed to retain its identity or authenticity.  □ Yes  □ No
   d. The archival material(s), artifact(s), library material(s), or photograph(s) poses a physical hazard or is dangerous to the health of museum personnel.  □ Yes  □ No
   e. The archival material(s), artifact(s), library material(s), or photograph(s) is the subject of irreversible deterioration or infestation and may imperil the condition of other artifacts in collections and on exhibit.  □ Yes  □ No
   f. The archival material(s), artifact(s), library material(s), or photograph(s) is not original or is a copy of material(s) owned by another repository.  □ Yes  □ No

4. Other Criteria:  ____________________________
Recommended Disposition:

□ Transfer to Education Department
□ Transfer to Exhibits Department
□ Transfer to Library
□ Donate to a More Appropriate Institution: ____________________________________________

□ Intentional Destruction of Damaged or Hazardous Artifacts
□ Disposal of Unidentified or Duplicate Artifacts
□ Disposal of Artifacts that Fall Outside of the Museum’s Scope
□ Sell and Use Proceeds to Upgrade Collections
□ Other: ____________________________________________________________

Approval:

Curator of Collections: □ Approved □ Not Approved Date: ___________
Reason for non-approval: _____________________________________________
Other Comments: ___________________________________________________
Signature: __________________________________________________________

Director: □ Approved □ Not Approved Date: ___________
Reason for non-approval: _____________________________________________
Other Comments: ___________________________________________________
Signature: __________________________________________________________

Board of Directors/Collections Committee: □ Approved □ Not Approved Date: ___________
Reason for non-approval: _____________________________________________
Other Comments: ___________________________________________________
Signature: __________________________________________________________

Final Disposition of Artifact:

Disposition: __________________________________________________________
By: _____________________________ Date: ________________

Final Disposition of Artifact:

Disposition: __________________________________________________________
By: _____________________________ Date: ________________