



## Scientific Services – Artifact Analysis and Examination

### Personal Information

Miss  Mrs.  Ms.  Mr.  Dr.

First Name: \_\_\_\_\_

Province/State: \_\_\_\_\_

Last Name: \_\_\_\_\_

Country: \_\_\_\_\_

Organization: \_\_\_\_\_

Postal/Zip code: \_\_\_\_\_

Title/Position: \_\_\_\_\_

Web Site: (if applicable): \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

\_\_\_\_\_

Fax: \_\_\_\_\_

City: \_\_\_\_\_

E-mail: \_\_\_\_\_

Organization Type (see Client Categories on the CCI Web site): \_\_\_\_\_

### Request Information

#### Object Information

Type of object (e.g. painting, sculpture, textiles, industrial artifact): \_\_\_\_\_

Description (materials, technique, method of fabrication): \_\_\_\_\_

\_\_\_\_\_

Name or title of object: \_\_\_\_\_ Accession number: \_\_\_\_\_

Does your institution own this object?  Yes  No

If no, owner contact information: \_\_\_\_\_

Object creation date: \_\_\_\_\_ Attribution (artist, country, culture, tribe, site name, etc.): \_\_\_\_\_

Approximate dimensions: \_\_\_\_\_ Approximate weight: \_\_\_\_\_

Condition of object: \_\_\_\_\_

Additional information: \_\_\_\_\_

**Significance** – What is the significance of the object? (Attach copies of pertinent literature or documentation.)

**Purpose of Request** – What do you want the analysis to answer? \_\_\_\_\_

Describe the anticipated benefits and uses of the results of this analysis/examination: \_\_\_\_\_

**Key Request Dates** – Requested completion date: \_\_\_\_\_

You may attach supporting documents or images