

COLLECTION ITEM(S) DEACCESSION FORM

Date _____

Collection Name: _____ Accession # _____

Inventory of Object(s) from collection to be deaccessioned, include catalog number, count, and description (Use additional pages if necessary):

Object ID.	Object Name -- Description	Accessed Condition	Inspection Condition

Reason for Deaccessioning:

- outside scope of collections*
- replacement with better examples*
- lack of physical integrity due to loss of documentation*
- limited storage space*
- deterioration beyond usefulness*
- duplication of material*

*Explain in detail:.

Method of Disposal:

- Transfer*
- Destruction*
- Exchange*
- Sale*
- Education or Research*
- Repatriation/Disposition*

*Explain in detail (include as appropriate: name and address of institution transferred to, collection exchanged in return, method of destruction, amount of sale, method of repatriation, other details as deemed appropriate):

Signatures: _____
Archivist

Collection Committee Chairman

Date: _____

Date: _____