

Mary R. Schiff Library & Archives

ARCHIVAL RESEARCHER AGREEMENT

The Mary R. Schiff Library and Archives of the Cincinnati Art Museum holds records that are fragile, valuable, and often irreplaceable. To help protect and preserve them, researchers are asked to read and accept the following conditions:

- A valid photo ID (driver's license, student ID, institutional ID) must be presented on your first visit.
- Only bring items with you that are essential for your research (e.g. notepaper, laptop, camera). **Coats, bags, purses, laptop cases, files, folders, etc., are not allowed at tables while archival materials are being consulted.** You will be asked to leave such items in the museum's coatroom or at the reference desk in the reading room.
- When consulting archival materials, use care and common sense:
 - **Wash hands before handling archival materials**
 - **Do not consume food or drink at the reading table**
 - **Do not mark or erase documents**
 - **Do not trace or write on top of documents**
 - **Do not rub, fold, or lean on documents**
 - **Only use pencils for writing**
 - **Wear cotton gloves when handling photographic materials – available from the reference desk**
 - **Keep loose documents in the order in which they were received**
- For the benefit of other patrons, cellphones, computers, and other devices should be set to silent in the reading room.
- **Under no circumstances may archival records be removed from the reading room.** To ensure the security of the collection:
 - All items are checked on issue and return
 - The reading room is monitored by library staff and security cameras
 - Personal belongings may be inspected on leaving the library/museum
- **Archival materials may not be copied or photographed without first asking a member of staff.** Permission to copy material will be granted on a case-by-case basis and may be refused if it could result in damage to the records, or if donor, acquisition, or legal restrictions prohibit duplication.
- **Any copies created may be used only for private study, scholarship, or research.** The publication or reproduction of any material from the archives, in full or in extract, is permitted only after obtaining written permission **prior** to publication.
- Any researcher who does not act in accordance with this agreement, or who demonstrates carelessness or deliberate destructiveness that endangers the safety of archival materials will have their access suspended.
- **Please note, while the Mary R. Schiff Library and Archives aims to make its archival collections as accessible as possible, it reserves the right to limit or refuse access to any record without notice to protect the interests of the museum and the privacy of individuals.**

For Library use

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|----------------------|--|
| ID presented: | |
| Entered to database: | |

Please complete in BLOCK CAPITALS¹

Name: _____

Institution: _____

Address: _____

City: _____ State, ZIP: _____

Phone #: _____ Email: _____

Purpose of research (*e.g. for use in a book/article; family history*):

Research subject:

How did you hear about the archives (*e.g. web search, Ohiolink, word of mouth*)?

I have read the Researcher's Agreement overleaf and agree to these conditions.

Signature: _____ **Date:** _____

¹ Personal details are collected to monitor the use of archival materials only and will not be used for marketing or similar purposes.