

University of Pretoria Museums Archive Room 1-8 • Old Arts Building • Lynnwood Rd • Hatfield Campus • Pretoria • 0002 • Gauteng Tel: + 27 12 420 2291 • Email:upmuseumsarchive@up.ac.za

UNIVERSITY OF PRETORIA (UP) MUSEUMS ARCHIVE RESEARCHER REGISTRATION FORM

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Surname:			
First name:			
UP Personnel no	/UP Student no	./ ID no	
Affiliation/Institution:			
E-Mail:			
Contact number:			

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University name				
Level of study or degree				
Faculty/ Department/Subject				
Provide a brief description of proposed research topic/title. Please attach a full motivation and/or copy of the final research proposal & proof of ethics clearance.				
[<i>Tick where applicable, for the purposes of</i>] □ Academic publication □ Non-academic publication □ Class assignment □ Research project □ Exhibition □ Media □ Digital □ Master's Thesis □ PhD Thesis □Honours mini thesis □ Other				

Please provide more details on the nature or purpose of the research:

Request for access to and permission for use of:

□ Artist biographies □ Artwork Details □ Historical Images □ Newspaper/Magazines □ History of the Art Archive □ Ephemera □ Administrative Documents □ Donation Documents □ Artist Sketches □ Historical documents □ Collection Histories

Details of Collection requiring access:

Contents required from the specific collection: Attach more information i.e., date range of material or list of required information or provide bibliography if available.

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I agree to the terms and conditions, the appointment date, and times for access:

Signature of Archivist

Date

Signature Research Applicant

Date

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- IP Compliance Regulation
- Research Compliance Regulation
- Guidelines on Research
- Guidelines on research Contracts and Consulting
- Policy on Electronic Theses and Dissertation

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