

## STAND Contact Information

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<b>May the library display your name publicly?</b>			
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If digital, how much data?		If digital, what kinds of files? (pdf, jpg, etc.)	
Is there material you want restricted? Describe the materials and why.			
Length of restriction	<input type="checkbox"/> 1 Year <input type="checkbox"/> 2 Years <input type="checkbox"/> 5 Years <input type="checkbox"/> 10 Years <input type="checkbox"/> 75 Years	Are you transferring material with any of these kinds of information? Check all that apply.	<input type="checkbox"/> University records <input type="checkbox"/> Financial records <input type="checkbox"/> Medical records <input type="checkbox"/> Personally Identifiable Information (PII) <input type="checkbox"/> Phone Numbers <input type="checkbox"/> Social media handles
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If duplicates are discovered, private information is identified, or items are deemed not suitable for our collection, what should archives staff do?		<input type="checkbox"/> Give it back <input type="checkbox"/> Destroy it <input type="checkbox"/> Ask me what to do	
Copyright (Please check one) Please feel free to inquire about copyright details		<input type="checkbox"/> I/we retain copyright of materials <input type="checkbox"/> We assign copyright to APSU	

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If yes, please check yes and sign the deposit license below.**

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- No, I would like my material to be included in the archive, but not posted online.**

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