

Scientific Research Request Form

Department of Paleobotany and Paleoecology Cleveland Museum of Natural History 1 Wade Oval Drive, Cleveland, OH 44106

Researchers who wish to access the paleobotany and palynology collection of the Department of Paleobotany and Paleoecology for scientific study must complete this form. Please email the completed form to the Curator of Paleobotany and Paleoecology at dsu@cmnh.org. All research conducted at CMNH or from CMNH collections that result in a publication must acknowledge the department and the museum.

**********	*************	*******
Name of Researcher		
Title	E-mail	
Department and Institution		
Address		
Faculty Advisor (if student)		
Title	E-mail	
Department and Institution		
Address		

posed Research	
which research will be utilized (grant proposal, publication, dissertation, etc.)
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r the John H. Hoskins Grant-in-Aid program, please indicate that in the tex	
•i	which research will be utilized (grant proposal, publication, dissertation, etc. Dates of Research ription of proposed research (include proposed materials and methods). If you or the John H. Hoskins Grant-in-Aid program, please indicate that in the tex provide a separate 1-page description.

Are any of	the methods dest	ructive or potenti	ally destructive?	Yes	No)
•	-	ef description of to be potentially do		and justific	cation.	Please note
Please indi	cate if you are red	questing a loan fo	r this research re	equest:	_Yes _	No
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Your signature below indicates that y the use of the Paleobotany and Paly History. Your typed name in the space	nology collection at the Clev	eland Museum of Natura
Signature of Researcher		Date
Signature of Advisor (if Student Rese	ŕ	Date
Departmental Use Only	*****	**************************************
Research Request Approved?	Date of Approval/Denia	al
Loan Request Approved?	Date of Approval/Denia	al
Additional Notes		
Signature of Curator	Dat	te
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