



WILLIAM S. WEBB MUSEUM OF ANTHROPOLOGY

University of Kentucky, 1020A Export Street, Lexington, KY 40504-2690
859-257-1944 • fax: 859-323-9866

INTENT TO CURATE

PROJECT NAME _____ DATES _____

LOCATION _____

SITE NUMBERS (if known) _____

SCOPE OF WORK _____

AGENCY/CONTRACTOR _____

PRINCIPAL INVESTIGATOR _____

PHONE _____ EMAIL _____

COLLECTION TYPE ☐ HISTORIC ☐ PREHISTORIC
☐ ARTIFACTS & DOCUMENTATION ☐ **DOCUMENTATION ONLY
***Documentation should include all original project records as outlined in the Curation Guidelines*

ARTIFACT
DISPOSITION ☐ NO FIND ☐ RETURNED TO LANDOWNER ☐ PARTIAL RETURN

*ARTIFACT COUNT _____ ARTIFACT BOX COUNT _____ DOCUMENT BOX COUNT _____
**regardless of disposition*

The undersigned acknowledges that he/she had read and agrees to comply with the *Standards for the Preparation of Archaeological Specimens and Documents for Curation at the Webb Museum*.

Date Name/Title, Signature

The William S. Webb Museum of Anthropology, University of Kentucky, agrees to serve as repository for the collections recovered during the project listed on this form. Final accession into the Museum is contingent upon compliance with the *Standards for the Preparation of Archaeological Specimens and Documents for Curation at the Webb Museum*.

Date WSWMA Official, Title, Signature



WILLIAM S. WEBB MUSEUM OF ANTHROPOLOGY

University of Kentucky, 1020A Export Street, Lexington, KY 40504-2690
859-257-1944 • fax: 859-323-9866

HOW TO FILL OUT THE INTENT TO CURATE FORM

PROJECT NAME: Brief descriptive label for the project.

DATES: Date(s) of fieldwork.

LOCATION: County/locality where the work was performed.

SITE NUMBER(S): If known, otherwise, to be updated once official trinomials are received from OSA. Please contact the Curator once the site numbers are known.

SCOPE OF WORK: Brief description of the scope of work.

AGENCY/CONTRACTOR: Consultant or agency responsible for curation cost.

PRINCIPAL INVESTIGATOR: Principal Investigator for the project.

PHONE: Phone contact information for Principal Investigator.

EMAIL: Email contact information for Principal Investigator.

COLLECTION TYPE: Check all boxes that apply.

DOCUMENTATION ONLY: If artifacts are fully or partially returned to landowner or no find.

ARTIFACT DISPOSITION: Tick all that apply. Artifacts from one project may be partially curated and partially returned to landowner. This should not affect the disposition of the documents which are required to be curated with an approved facility.

ARTIFACT COUNT: Total number or estimated number of artifacts for the full assemblage regardless of whether or not they have been fully or partially returned to the landowner.

ARTIFACT BOX COUNT/DOCUMENT BOX COUNT: Volume or estimated volume of material to be curated. Box refers to the required archival boxes detailed in the WSWMA Standards document.