# Archive Completion Form Checklist

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| **Project name:** | | | **Accession No.:** |
| **Contractor’s site code**: |
| Contact person: |  | | |
| Contractor |  | | |
| Address |  | | |
| Telephone |  | Fax |  |
| Email |  | | |
| **The Archive**  □ Project Initiation Form submitted  □ Mid-Project Agreement submitted  □ Specialist Report summary submitted ( number)  □ Retention Policy Agreement submitted  □ Project Completion Form submitted  □ Assignment of Copyright submitted  □ A full inventory of the Archive is attached  □ The Archive is accompanied by a full transfer of title | | | |