|  |  |
| --- | --- |
| Document with solid fill | **Florida Department of Transportation**  **Artifact Deaccession Form** |

To recommend or request the deaccessioning of any FDOT Archaeological Collections artifacts, the first three (3) sections of this form must be filled out and submitted to the *Office of Environmental Management (OEM) for review and approval.* The completion of this form by the Collections Manager or OEM Cultural Resource Staff member is required for deaccessioning artifacts from the FDOT Catalog Database. Additional or extended information may be attached to this form. After deaccessioning, this form and any documentation regarding the transfer or use of the artifacts should be kept with the other site and project documents.

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Requestor’s Information | | | | | | | | | | | | |
| Full Name: | Type Here | | | | | | | | Submission Date: | | | Click or tap to enter a date. |
| Phone: | Type Here | | | | | | Email: | Type Here | | | | |
| Professional Affiliation (if any): | | | | | | Type Here | | | | | | |
| Requestor’s Resume or C.V. are attached (encouraged).  Yes  No | | | | | | | | | | | | |
| Artifact(s) | | | | | | | | | | | | |
| FDOT Project Catalog ID: | | | | | Type Here | | | | | | | |
| FMSF Site Number: | | | | | Type Here | | | | | | | |
| FS and Lot #(s): | | | | | Type Here | | | | | | | |
| Catalog Accession #: | | | | | Type Here | | | | | | | |
| Artifact(s) Description: | | | | | | | | | | | | |
| Type Here | | | | | | | | | | | | |
| Reasoning | | | | | | | | | | | | |
| Reason for Deaccessioning (select all that apply): | | | | | | | | | | | | |
| Lacking Provenience Information | | | | | | | | | | | | |
| Overly Redundant and Not Useful to Further Research | | | | | | | | | | | | |
| Lacking Physical Integrity | | | | | | | | | | | | |
| Used as a Destructive Sample for Research | | | | | | | | | | | | |
| Requires Repatriation or Return to a Descendent Community | | | | | | | | | | | | |
| Justification for Deaccessioning (attach additional sheets if necessary): | | | | | | | | | | | | |
| Type Here | | | | | | | | | | | | |
| FDOT Office of Environmental Management Use | | | | | | | | | | | | |
| OEM Deaccessioning Review | | | | | | | | | | | | |
| This request has been: | | | | | | Accepted | | Not Accepted | | | on | Click or tap to enter a date. |
| Reviewer(s): | | Type Here | | | | | | | | | | |
|  | | Type Here | | | | | | | | | | |
| Review comments and details (optional): | | | | | | | | | | | | |
| Type Here | | | | | | | | | | | | |
| Affirmation of Responsibility | | | | | | | | | | | | |
| *By signing this document, OEM verifies that the request has been reviewed by an OEM CR Staff member who meets or exceeds the Secretary of the Interior's (SOIs) Standards and Guidelines for Archeology and Historic Preservation professional qualifications in an approved field. Further, OEM affirms that the deaccessioning process and subsequent action with the deaccessioned artifacts complies with the FDOT Collections and Curation Guidelines and Guidelines.* | | | | | | | | | | | | |
| Reviewer Signature: | | | | Shape  Description automatically generated with low confidence | | | | | | | Date: | Click or tap to enter a date. |
| Printed Name:  Title: | | | | Type Here  Type Here | | | | | | |  |  |
| Supervisor Signature: | | | | Shape  Description automatically generated with low confidence | | | | | | | Date: | Click or tap to enter a date. |
| Printed Name:  Title: | | | | Type Here  Type Here | | | | | | |  |  |
| Official Deaccession Date: | | | | | | Click or tap to enter a date. | | | | | | |
| Action for Deaccessioned Artifacts | | | | | | | | | | | | |
| Donated to an Outside Institution for Research or Education | | | | | | | | | | Other (please explain): | | |
| Used for Destructive Sampling | | | | | | | | | | Type Here | | |
| Returned to Descendent Community Upon Request | | | | | | | | | |
| Repatriated to the Site or Requested Location | | | | | | | | | |
| Disposition Details for the subject artifacts: | | | | | | | | | | | | |
| Type Here | | | | | | | | | | | | |
| Disposition Date: | | | Click or tap to enter a date. | | | | | | | | | |