Name:

Address:

Email:          Telephone:

University Affiliation:
☐ Georgia Southern Faculty/Staff  ☐ Georgia Southern Alumni
☐ Georgia Southern Graduate Student  ☐ Community
☐ Georgia Southern Undergraduate Student  ☐ Other: __________________________

Please indicate the purpose of your research (Check all that apply):
☐ Dissertation/Thesis  ☐ Local History
☐ Genealogy  ☐ Publication
☐ Exhibition  ☐ Class Assignment: ☐ Other:

Subject of Research:
Please include all names, dates, and any other pertinent information.

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Signature                        Date