



1013 Broad Street  
Durham, North Carolina 27705  
PHONE: (919) 416-8420 | FAX: (919) 416-8584  
EMAIL: duke\_fossil\_lab@duke.edu

### **Research Proposal Form**

This form should be submitted via email or fax at least one month prior to proposed visit.

Researcher Name: \_\_\_\_\_

Institution: \_\_\_\_\_

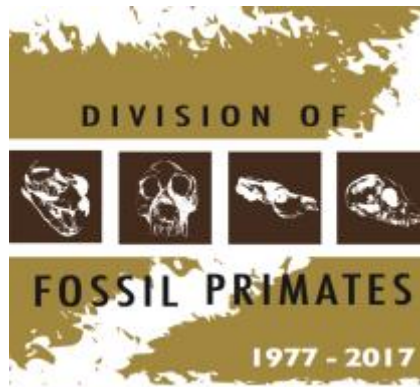
Position: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_ Work Phone: \_\_\_\_\_ HomePhone: \_\_\_\_\_

If student, please list advisor or project supervisor: \_\_\_\_\_

Summary of proposed research (including methods and significance – use only the space provided below):



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I agree not to take or use photographs for publication or make molds/casts of specimens without written permission.

I agree to provide the DFP with copies of any photographs taken and to copyright them to the DFP. I also agree to provide the DFP with one copy of any casts produced from my work.

I understand that the lab is only open during regular business hours (M-F, 9-5).

I have read, understand, and fully agree to the Division's "Collections Use Policies," which can be found online at <http://www.fossils.duke.edu/collections/fossils.html/>

I understand that research cannot commence until approval is received in writing.

Any publications resulting from the use of these samples must contain a DLC publication number, obtainable from the Research Manager. Please request a number once your manuscript has been accepted.

I agree to provide a copy (PDF preferred) of any publications resulting from this work to the DFP. I will add a DFP publication number to all articles published and agree to acknowledge the appropriate collaborators.

I agree to provide a copy (raw) of any MicroCT scans if applicable. MicroCT scans should be done at DFP if you suspect that they will be needed prior to borrowing.

Signed: \_\_\_\_\_

Date: \_\_\_\_\_