

MUSEUM PROPERTY DEACCESSION FORM

General

Deaccession No.: _____ Date Deaccessioned : _____

Item Count of Objects and/or Specimens: _____ List attached

Accessions Involved: _____

Deaccession Type:

- Return to Rightful Owner
- Loss or Involuntary Destruction
- Outside Scope of Collection
 - Exchange Transfer Sale Donation Abandonment
- NAGPRA Compliance

Prepared By: _____ (Signature & Title) _____ (Date)

Justification for Deaccession: _____

Cause of Loss or Abandonment: _____

Proposed Disposition: _____

Total Value: \$ _____ Estimate: \$ _____ Appraisal: \$ _____

Designated Authority

Deaccession: Approve: ___ Disapprove: ___
Disposition: Approve: ___ Disapprove: ___

_____ (Signature & Title) _____ (Date)

Museum Property Administrator (for permanent disposal of museum property)

Deaccession approved: Yes: ___ No: ___
Disposition approved: Yes: ___ No: ___

Comments:

_____ (Signature - Museum Property Administrator) _____ (Date)

Note: Attach required justifications.