



A.R. Bowman Museum Research Request Form

426 N Main St.
Prineville, Or. 97754
541-447-3715

Research Policies and Procedures at the Bowman Museum:

The Bowman Museum holds a rich collection of objects, photos, and research materials related to Central Oregon. We welcome personal and professional research with the following guidelines:

Research Requests are supervised by museum staff. Some requests may be handled by volunteers, but all work is approved and verified by staff. Any reproduction or publication of materials must follow our guidelines and be approved by the staff, with applicable fees.

Appointments for using the Research Library and Collections should be made at least two weeks in advance. This allows staff time to prepare the requested materials. To schedule, please complete the form below, and a staff member will contact you to confirm the appointment. Availability may be limited based on staff and volunteer schedules. If you handle museum items, our Collection Specialist will guide you in proper care. Misuse of materials may result in restrictions on future access.

Walk-in Research is based on the availability of staff or volunteers. Many requests can be fulfilled by email or phone. If your request can't be completed during your visit, please fill out this form, and we will contact you within two weeks.

Copyright Statement: All materials provided by the Bowman Museum, including photos, documents, and archives, are the museum's intellectual property. These materials are available for research use only and cannot be reproduced or used commercially without the museum's written consent. Researchers may use them for academic or personal study, with proper credit given to the Bowman Museum for any published work.

Contact

Name: _____ Date: _____

Address: _____

Institutional Affiliation (optional): _____

Phone: _____ Email: _____

The undersigned agrees to abide by the policies of the Crook County Historical Society and A.R. Bowman Museum regarding care of artifacts within the collection. Failure to abide by the rules will result in immediate removal of any artifact and potential ban from the premises.

Signature: _____ Date: _____

Research Request Information

Nature of Research:

- Publication
- Personal Interest
- Reproduction
- Genealogy
- Academic
- Other

Research Materials Requested:

- Photographs
- Documents
- Recordings
- Collection Records
- Artifacts
- Other

Information Requested:

Dates and Times Available (If applicable):

Office Use Only

Staff completing research: _____

Time required for research: _____ Request needed by: _____

Reviewed by: _____ Request Closed Date: _____