

**University Art Collection
Accession Proposal**

Name: _____

Department: _____

Email: _____

Means of Acquisition: _____ Donation _____ Purchase

Artwork Details

Artist: _____

Title: _____

Date: _____

Medium: _____

Dimensions (inches): H: _____ W: _____ D: _____

Signature: _____ Yes _____ No

Condition: _____ Excellent _____ Good _____ Fair _____ Poor

Comments: _____

Appraisal Value: _____

Special Requirements: _____

Donations

Donor Name: _____

Provenance: _____

Purchases

Gallery/Dealer Name: _____

Gallery Location: _____