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: ________________________________

*Email completed form with artwork images to the University Curator for review by the Curator and Dean of Libraries.