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| Improving acquisition of digital archival collections  |
| Application form |

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| *Application form**(all sections must be completed, and can be expanded to include submission information)*  |  |
| Name of institution/organisation:  |
| Participants[Please supply the names and roles of the two staff members who will participate in the project with responsibility for e-resources management and acquisition, both at a senior and practitioner level.] |
| Full contact details for primary contactName:Position:Email:Address:Tel: |
| What issues does your institution face around the purchasing of digital archival collections?  |
| What approach or strategy does your institution have in relation to the purchasing of digital archival collections? |
| Information of digital archival collections purchased so far [Please complete the separate spreadsheet] |
| Tick this box to indicate that Jisc grant terms & conditions have been agreed without contestation by an authorised member of your institution.  |
| Tick this box to indicate that this proposal has been approved by an authorised member of the institution |