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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 contact  Name:  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 | |