

ROMAN CATHOLIC ARCHDIOCESE OF HARTFORD



OFFICE OF THE ARCHDIOCESAN ARCHIVES

**RESEARCH REQUEST FORM
for Historians and Other Researchers**

-Do not use for genealogy/ family history research/ requests-
(Please type or print clearly)

DATE: _____
(Month/Day/Year)

NAME: _____
Last First M.I.

ADDRESS: _____
Number & Street address Apt/Ste. #

City/Town State Zip code

FOREIGN ADDRESS (if outside the U.S.A.): _____

PHONE: _____ (home/office/mobile)
(Primary)

_____ (home/office/mobile)
(Secondary – optional)

EMAIL: _____
(Primary – optional)

(Secondary – optional)

TYPE OF RESEARCH:

- _____ Academic research
 - N/A *Clergy or Religious information (unavailable)*
 - N/A *Family History/ Genealogy (unavailable)*
 - _____ Historical research
 - _____ Legal request
 - _____ Media Story/Inquiry or Permission to Publish
 - _____ Personal interest topic
 - _____ Professional/ Business
 - _____ Religious/ Theological
 - _____ Other _____
- (Please specify)

TOPIC: _____
(One topic/question per form) (Complete new form for each additional topic/question)

RESEARCH TOPIC & PURPOSE:

SPONSOR OR COMMISSIONING ENTITY:
(If research is for reasons/purposes other than personal interest)

NAME OF PERSON (if personal research, write "Self" or if major research/scholarship project,
name of person authorizing project)*

COMPANY/INSTITUTION/ORGANIZATION (if applicable)

SPONSOR'S ADDRESS (required)

_____ (home/office/mobile)

SPONSOR'S PHONE (required)

SPONSOR'S EMAIL (required)

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Please list all possible records, materials, collections, etc., you may wish to have accessed:

Please indicate research deadline (if applicable): _____

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APPLICATION PROCESS AND PAYMENT:

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- Only personal or corporate checks will be accepted.
- Check must be in U.S. currency and drawn from a U.S. bank. Do not send cash.
- Please make checks payable to: **Archdiocese of Hartford**
- On the memo line, please write: **Archives**
- Fulfillment of requests is a courtesy, if and when time permits.
- Results are not guaranteed.
- Please allow for 6-8 months for a response. Please plan accordingly.

For major research/scholarship projects, please provide a copy of your project proposal. Research appointments are at the discretion of the Archivist and in accordance with departmental policies and procedures.

Mail your request form, check, and any supporting documents (as applicable):

**Archdiocese of Hartford Archives
134 Farmington Ave.
Hartford, CT 06105-3784**

860-541-6491 (P)

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