

Interview Agreement

The Youngstown State University Oral History Program is a project of the Youngstown State University Center for Historic Preservation. Tape recordings and transcripts resulting from interviews conducted for the Program are deposited in the Oral History Collection and Maag Library at Youngstown State University where they are made available for historical and other academic research and public dissemination. Interviews are regulated according to any restrictions placed on their use by the interviewee and/or interviewer.

Participation in the Program is entirely voluntary.

We, the undersigned, have read the above and voluntarily offer Youngstown State University Oral History Program full use of the information contained on tape recordings and in transcripts of these recordings. In view of the scholarly value of this research material, we hereby assign rights, title, and interest pertaining to it to the University.

Name of Interviewer

Name of Interviewee

Signature

Signature

Address

Address

City State Zip

City State Zip

Date

Date

Should any of the above signatories have questions concerning their rights in this research initiative or as human subjects, they may contact the Oral History Program, Center for Preservation, at Youngstown State University, One University Plaza, Youngstown, OH 44555, (330) 742-3452.

YOUNGSTOWN STATE UNIVERSITY ORAL HISTORY

DONOR RELEASE FORM

I, _____, do hereby give to the Youngstown State
Name of Donor

University Oral History Program for such scholarly and educational uses as the Director of the Oral
History Program shall determine the following tape-recorded interview(s):

recorded on _____ as an unrestricted gift and
Date of Interview

transfer to Youngstown State University legal title and all literary property rights including copyright
This gift does not preclude any use which I may want to make of the information in the recording
myself.

Signature of Donor

Date

YOUNGSTOWN STATE UNIVERSITY ORAL HISTORY PROGRAM

Interviewee Life History Form (Attach Resume if available or applicable)

Name:				Sex	
	Last	First	Middle	Race	
Maiden Name if Applicable					
Marital Status					
	Spouse's Name		Date of Marriage		
Current Address					
	Street	City	County	State	Zip
Telephone:	() ____ - ____	Date of Birth	Mo.	Day	Year
Place of Birth: (Include country of birth)					
Parents Name	Father				
	Mother				
	Education	Institution	Dates attended	Degree(s)	
	High School				
	College				
Work Experience	Employer			Dates	
Retired (If Applicable)	From			Date	
Veterans Status					
	Branch	Dates Served	Discharged		
Honors, awards, or other recognition:					
Church:					
Organizations:					
Special interests (Hobbies, etc.)					

If necessary continue information on back.

YOUNGSTOWN STATE UNIVERSITY ORAL HISTORY PROGRAM

Proper Word Form and Interview Summary

OH#	Topic		
Tape Length	Minutes	(List length of side A and B of each tape)	
Interviewee Name			
Interviewer Name		Date of Interview	
Place of Interview			
<p>Description of interview. (Include topic(s) covered in the interview). Was there anyone else in attendance, what noise might be heard on the tape, etc.</p>			
<p>Proper Words: It is very important that we have correct spelling of Proper names and places. Be sure to list any words that may be unclear.</p>			

For Office Use Only

Transcription (Transcriber's name, date)			
Audit-Edit Clerk (Collator's name, date)			
Final editing (Editor's name, date)			
Proofreading (Proofreader's name, date)			
Indexed (name, date)			
Final corrections and index typing			
Copies made of transcript sent to:	Library	Interviewee	Others
Copies made of tape and for whom:			
<p>Other information pertinent to this interview (documents included, final copy cited in published works, etc.):</p>			

YOUNGSTOWN STATE UNIVERSITY ORAL HISTORY PROGRAM

Interview Cover Sheet and Checklist:

Name of Interviewee			
Address:			
Telephone Nurnbers(s)	(Home)	(Work)	
Date and time of interview			
Place of Interview			
No. of original tapes		Approx. Length of interview in minutes	
Name of Interviewer			

Please complete this checklist. Return the checklist along with the tapes (original and copies) and the related materials to the Youngstown State Oral History Department.

_____ Push in tabs on the original tape(s) and label each according to Program standards.

_____ Arrange with the Program office to have original tape(s) copies.

_____ Release Form _____ Proper Word and Summary Form _____ Life History Form or resume of interviewee _____ Vitae or resume of Interviewer

Does the interviewee have photographs that we should/may copy? _____

Does the interviewee have papers or records that we should/may consider for archival collection?

Would the interviewee like a copy of the tape(s)? _____

Comments (special circumstances of the interview session, quality of the recording, etc., of which the Program should be aware):