

Rhode Island Archival and Manuscript Collections Online

Participating Institution Application and Collection Profile Form

Please review the [Join RIAMCO as a Participating Institution](#) webpage before completing this form.

A RIAMCO representative will contact your institution to review the information that you provided, present an overview of RIAMCO, and discuss strategies for preparing and submitting your collections to RIAMCO.

Institution Information

1. Institution name:
2. Director's name:
3. Director's e-mail:
4. Primary contact's name:
5. Primary contact's e-mail:
6. Address:
7. City:
8. State/Province:
9. Zip/postal code:
10. Country:
11. Phone:
12. Fax:
13. Institution website:

You may submit this application without the MARC Organization Code, though one will be required to join RIAMCO. If you do not have a code at the time of submission, you should request one from the Library of Congress. Please complete the application and notify RIAMCO once you have received the code from the Library of Congress. Repository codes and instructions for requesting a new code may be found on the [Library of Congress MARC Code List for Organizations Webpage](#).

14. MARC Organization Code ([search for code](#)):

15. Why does your institution want to contribute to RIAMCO?

16. What audience(s) does your institution serve?

- General public
- Elementary school students
- Middle school students
- High school students
- K-12 educational community (teachers, administrators)
- College undergraduate students
- College faculty
- Genealogists
- Scientists
- Staff at institution/peers
- Other (please specify):

Collection Information

17 Describe your institution's overall collection strengths:

18. Approximately how many collections does your institution have?

19. Please indicate if you maintain descriptions (i.e., finding aids, inventories, guides, or records documenting who created the collection, the dates of its creation, its provenance, the scope/content of the materials, etc.) in the following formats for your collections:

Don't Know	<input type="checkbox"/>
Print Finding Aid	<input type="checkbox"/>
PastPerfect	<input type="checkbox"/>
Encoded Archival Description (EAD) Finding Aids	<input type="checkbox"/>
HTML Web Pages or website	<input type="checkbox"/>
Machine-Readable Cataloging (MARC) Records	<input type="checkbox"/>
Archivists Toolkit	<input type="checkbox"/>
FileMaker Database	<input type="checkbox"/>
Microsoft Access Database	<input type="checkbox"/>
MySQL Database	<input type="checkbox"/>
OPAC/MARC Catalog	<input type="checkbox"/>
Sirsi Hyperion	<input type="checkbox"/>
Other (Please specify)	<input type="text"/>

To submit the form by email download it, complete the fields, and then click on the "Submit by Email" button in the top right corner of the first page.

If you prefer to send a paper copy, please print the completed form and mail it to:

Karen Eberhart, Manuscripts Processing Archivist
Brown University
John Hay Library, Box A
Providence, RI 02912