INTERVIEW COVER SHEET and CHECKLIST

ruii (complete) Name of Interviewee			_
Sex Race		_	
Complete Address			
Telephone Number(s) (home)(work)			
Email:	Date/time of interview:		
Place of interview (town/county/state):			
No. of original tapes/CDs;		Approx. length	of interview: minutes
Full (complete) Name of interviewer _			
Please complete this checklist. Return Southern Oral History Program.	the checklist along with the	tapes (listening copi	ies) and the related materials to the
Abstract , both hard and digital	copies (see attached example	e)	
Interview Agreement (release for	orm) Field Notes		Proper Word Form
Vitae or resume from interview	er Life History	Form	Vitae from interviewee (if applicable)
Are your fieldnotes to be made available discuss your concerns and options.)	e to researchers who request	t them? (If no	t, contact Jackie Dean, SHC, to
Does the interviewee have photographs	that we should/may copy? _		
Does the interviewee have papers or re-	cords that we should/may co	nsider for archival o	collection?
Would the interviewee like a copy of the	ne interview(s) and/or transcr	ript? Please specify	·
Comments (circumstances of the interv	iew session of which the SO	HP should be award	e):