

## Oral History Use Form

Use Policies:

Oral Histories are not to be altered (cropping is allowed) and must be cited.

Citation required for Oral Histories is ***“Oral History courtesy of Bellevue Alumnae Center for Nursing History, Foundation of New York State Nurses, Inc.”***

CD’s or Tapes of Oral Histories are issued for one-time use only. Clips or full interviews cannot be used on websites unless specific permission is granted.

User Information: *(Your signature below acknowledges acceptance of the oral history use policies listed above)*

Name: \_\_\_\_\_

Company/School: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_ (Home) (Cell) (Work)

Commercial Use \_\_\_\_\_ Not-for-profit Use \_\_\_\_\_

Oral History will be used for:

\_\_\_\_\_  
\_\_\_\_\_

Oral History Information:

Oral History Requested:

\_\_\_\_\_  
\_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_