File Ref.: ABFK/202…/…..

# DONATION FORM.

FILL IN AND SEND TO JENNIFER BEAULOYE, COLLECTIONS, ARCHIVES AND LIBRARY MANAGER (jbeauloye@kanal.brussels).

The information provided below will be examined by the KANAL Foundation’s Collections, Archives and Library Manager to assess the relevance of the proposal and to accept or refuse the donation or deposit.

Depending on the size of the offered fund, the received donation may be accepted by the KANAL Foundation’s Acquisition Committee.

The donation or deposit proposal form must be accompanied by an inventory of the books, archives or other documentation containing as much detail as possible and indicating the origin of the items (Excel).

For large donations, a selection and sorting process will be carried out with the donor or depositary before the items are packaged.

Donation references will include the donor’s name. Unless otherwise indicated, the online catalogue records will explicitly indicate ‘Donation from First name, Last name, year’.

If need be, the KANAL Foundation reserves the right to let go of volumes which prove unnecessary in the completion of its collections and/or to donate these to other institutions.

DONOR/DEPOSITARY CONTACT DETAILS

First and last names:

Company or institution (if connected):

Postal address:

Email:

Tel.:

DONATION/DEPOSIT DESCRIPTION:

Protagonist(s):

Theme(s) or subject(s):

Period:

Approximate volume:

TYPE(S) OF DOCUMENT(S):

* Handwritten archives
* Printed archives
* Books
* Journals
* Documentation
* Technical drawings and documents
* Photographs
* Videos
* Other:

PROPOSAL TYPE

* Long term\* deposit (indicate duration)
* Donation
* Indicate the conditions or specific clauses if applicable:

ADDITIONAL INFORMATION:

Reason for your donation/deposit:

(Move, cessation of activity, death or other)

Status (individual, institution or other):

DONATION TEXT:

* ‘Donation from First name Last name, year’
* Other:

OTHER COMMENT(S)/MORE INFORMATION:

ANNEX(ES):

* Inventory list of the volumes offered as a donation/deposit.

DATE:

PLACE:

SIGNATURE: