



OFFICE OF STUDENT INVOLVEMENT  
STUDENT ORGANIZATIONS HANDBOOK

## ARCHIVES STORAGE REQUEST FORM

All student organizations requesting to use University Archives Storage Space on campus must fill out this form. This form must be submitted to the Office of Student Involvement at least one week prior to the expected storage delivery. An Archives Storage Request Form must be completed for each box/tub placed in storage.

Once archived, student organizations will be able to view the archived items as needed. Items in archives storage will be kept for five years, unless specified on this form and approved by the Office of Student Involvement.

**Student Organization:**

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**SL or CA Name:**

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**SL or CA Email:**

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**SL or CA Phone:**

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**Hazardous Materials Included?**  Yes  No

**Archived Items Detailed List:**

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**Special Requests:**

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### ARCHIVED ITEMS INFORMATION:

Archived items will be kept in a controlled facility in standardized storage containers. The Office of Student Involvement and Drury University will not be responsible for lost or damaged items.

All applicable university regulations, state and federal laws, and municipal ordinances should be followed when storing items on campus. Failure to do so may result in disciplinary action. The Office of Student Involvement reserves the right to decline materials when their physical composition or condition may be hazardous to the health and safety of the staff or facility.

I have read and fully understand all related policies of Drury University, all student organization guidelines, and any applicable laws. I agree that our archives storage request will comply with all policies, guidelines, and laws. I understand that incomplete/false information could limit my group's ability to operate.

I certify that the information listed above is true. My signature on this form verifies that I agree to the previous statements and will comply with any action is deemed necessary by Drury University personnel.

Student Organization Authorized Signature      Date of Signature      Printed name of Authorized Student Organization representative

### OFFICE OF STUDENT INVOLVEMENT USE ONLY:

**Storage Facility:**

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**Storage Date:**

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**Storage Removal Date:**

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**Container Number:**

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**Container Type:**  Brown Box  Plastic Tub

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