**Recall from Archive Request Form**

*Please refer to TASC SOP 13 before completing this form*

|  |  |
| --- | --- |
| **Project Title and Acronym:** |  |
| **Sponsor:** |  |
| **IRAS No:(R&D/REC or other identifier)** |  | **CI or PI:** |  |
| **\*Retrieval cost to be paid by:** |  |
| **Date Archived:** |  | **Archiving Vendor:** | Claverhouse [ ]  Iron Mountain [ ]  |
| **Reason for retrieval:** |  |
| **Recall requested by (print name):**  |  | **Signature and Date:** |  |

*\* If retrieved from an external archive there may be a retrieval cost which shall be payable by the researcher*

|  |  |  |  |
| --- | --- | --- | --- |
| **Box Number** | **Location to be held** | **Items removed/changed/added (if any)** | **Date Returned\*** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

*\*Must not exceed 4 weeks after retrieval*

|  |  |  |  |
| --- | --- | --- | --- |
| GCP Archivist Signature for recall (approval)\*:CRC receipt of recall (signature)\*\*:CRC return of recall (signature)\*\*\*: |  | Date: |  |
|  | Date: |  |
|  | Date:  |  |

*\*Send to* *TASCArchiving@dundee.ac.uk* *for approval.* ***Archived material CANNOT be recalled without GCP Archivist approval***

*\*\*Once box has been recalled, received by CRC and given to requester*

*\*\*\* When box is returned to CRC for re-archiving*

*Please email a copy of this completed document to:* *TASCArchiving@dundee.ac.uk*