To be filled out by borrower:

Date: __________ Name: ______________ Phone: __________ Fax: __________
Title: ___________________________ Email: ______________
Department: ______________________________ Date needed (requests usually take a minimum of 3 months): __________
Building: ______________ Room: __________

- Requests accepted only during the academic year (September 1 to May 1)
- Installation of available works take place twice monthly, Fridays only.
- 98% of works already on view, limited number of artworks available

Please explain how the installation of Art Collection works in your space helps to support the educational mission of the University:

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**Type of Space**

- [ ] Public reception areas/lobbies/hallways
- [ ] Suites and/or reception areas
- [ ] Department conference/seminar
- [ ] ZSR Library conference rooms, stacks, reading areas, and Starbucks
- [ ] Offices of the President, Vice Presidents, Provost, and Deans
- [ ] President’s House
- [ ] Admissions Office
- [ ] Magnolia Room and other dining spaces in Reynolda Hall
- [ ] Other (please specify): ______

**Security and Access**

- [ ] Constant live security during business hours
- [ ] No live security during business hours
- [ ] Occasional live security during business hours
- [ ] After hours security system with keypad
- When is space unlocked and locked? ______
- Who has access to the space? ______

**Light**

- [ ] Number of windows in space: ______
- [ ] Ultraviolet window treatments present

Please share with us any aesthetic preferences you may have:
Please include a sketch of the space that indicates:

- walls & spaces available for works of art
- locations of windows, doors, furniture
- width and height of each wall
- existence of chair rails
- height from top edge of chair rail and/or height of furniture

I have read and agree to the terms and conditions in the Art Loan Policy:

_________________________________________  ____________________
Signature of borrower     Date

_________________________________________  ____________________
Approved by (OUAC Curator)    Date

For OUAC office use only:

Artwork Assigned:

Installation Notes:

_________________________________________  ____________________
Request Completed by     Date