

Fill out this **Submission Information Form** for EACH file you submit to the Queens Memory Project for consideration in the QMP archives held at the Archives at Queens Library. Files without complete information will NOT be eligible for preservation.



# Queens Memory Project Submission Information Form



## Appendix A Oral History Recordings:

Date of interview: \_\_\_\_\_

Time period(s) discussed in interview: \_\_\_\_\_

Name of interviewer: \_\_\_\_\_

Name of interviewee: \_\_\_\_\_

Birth date of interviewee: (ex: 03/15/1978) \_\_\_\_\_

Location where interview took place (specific address if possible):  
\_\_\_\_\_

Places discussed in interview: \_\_\_\_\_

People discussed in interview: \_\_\_\_\_

Organizations discussed in interview: \_\_\_\_\_

Make and model of recorder used: \_\_\_\_\_

Language(s) used in interview: \_\_\_\_\_

### Additional Notes: **any or all** of the following information:

Length of time interviewee has lived in the neighborhood, Ethnic background, Occupation, Housing type (renting an apartment, owning a house, etc), Age of interviewer and/or age of interviewee, Particular involvements with neighborhood (church, civic involvement), Context for the interview (conducted for QMP, a class, personal project, etc)

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Burn your photo and/or audio files to a blank CD along with (1) this completed form, (2) a Contributor Agreement and (3) a Donor Consent form from your interviewee (if applicable) and mail to:

Queens Library, Library Services Dept., Attn: Natalie Milbrodt, 89-11 Merrick Blvd., Jamaica, NY 11432

**For More Information, Contact:** Director, Natalie Milbrodt ([Natalie.Milbrodt@queenslibrary.org](mailto:Natalie.Milbrodt@queenslibrary.org))