FEDERAL PROFESSIONAL QUALIFICATIONS DOCUMENTATION FOR <u>HISTORY</u>

Name:		
Organization:		
Address:		
City:	State:	Zip Code:
Website:	Email:	
Telephone:	Fax:	
I would like to be included on the consultants.	Ohio Historic Preserva	tion Office list of qualified
I would like my qualifications to be included on the consultants list.	e reviewed, and status	determined, but I do not wish to be
The following information is requested to docume requirements of the federal government, as stated Interior's Standards and Guidelines," Federal Regis	d in "Archaeology and F	Historic Preservation: Secretary of the
The minimum professional qualifications are a grabachelor's degree in history or a closely related field. 1. At least two years of full-time experier demonstrable professional activity with museum, or other professional institute. 2. Substantial contribution through reseat the field of history.	eld plus one of the follonce in research, writing than academic institutition; or	owing: I, teaching, interpretation, or other on, historical organization or agency,
A. List any graduate degrees in history. Include Example: M.A., 1993, Moser College, 19th		
B. List any graduate degrees in fields closely of specialization. Briefly explain the releva		

 C. List any bachelor's degree in history or a closely related field. Include degree, field, year, and institution. For any degree in a field other than history, briefly discuss the relevance of you undergraduate train to the study of history. 		
D.	yea	ose without a graduate degree in history or a closely related field must demonstrate at least two ars experience in history or a substantial contribution to scholarly research and publication in tory.
	1.	List your experience in history, including employer, dates employed, title, nature of work, and length of experience converted to full-time months. Acceptable experience includes, but is not limited to, research, writing, teaching, or interpretation within an academic institution, historic organization, museum, or other professional institution, (e.g. Moser Museum, 1982, Research Assistant, planning exhibit and writing booklet on history of the City of Somno, 3 full-time months).
	2.	List scholarly research, publications, and reports in history. If research listed here has not resulted in a report or publication, describe the use to which the results were applied. Attach separate sheet if necessary.

ALL APPLICANTS

Α.	Attach a statement with any other information or explanations which you would like to have considered.				
В.	Attach a current resume to this completed form.				
C.	The information submitted on this form and associated attachments is accurate to the best of your knowledge.				
D.	By submitting this form you agree that for work in all program areas of the State Historic Preservation Office to follow State Historic Preservation Office guidance and processes regarding research, scholarship presentation of prepared documents, and accepted methods for citing and quoting another's work, published sources, and copyrighted material. You pledge to carry out work in an ethical and professional manner. You understand that failure to abide by this pledge may result in removal of your name from the Consultants' List.				
	Name:Date:				
	Signature:				
Sul	bmission Process:				
1.	Submit your documentation to the State Historic Preservation Office, Ohio History Connection, 800 E. 17 th Avenue, Columbus, Ohio 43211-2474.				
2.	The State Historic Preservation Office will review your documentation and provide you with our opinion as to whether your qualifications meet the standards established by the National Park Service.				
3.	If you would like to be included on the State Historic Preservation Office online list of qualified consultants include your \$60.00 annual subscription fee. Subscription to the Consultants List is on a state fiscal year basis, July-June. Method of Payment:				
	☐ Check enclosed payable to "Ohio History Connection"				
	□ Purchase Order Number:				
	□ Visa □ American Express □ Master Card □ Discover				
	Card Number:				
	Expiration Date:CID#				
	Name on Card:				
	Cardholder Signature:				

4. If your qualifications meet the standards, the fee will be processed. If we find that you do not meet the standards, your fee will be returned with an explanation as to why your qualifications do not meet the standards.

Contact the State Historic Preservation Office with questions at the address above, by calling (614) 298-2000, or by E-mail: shpo@ohiohistory.org.