

[CAMPUS LETTERHEAD]

***[CAMPUS] Department/Unit Self-Assessment of Native American Origin  
Collections***

**Report Due Date:**

**Department/Unit**

**Head of Department/Unit**

**Instructions**

Please perform a physical inspection of all department/unit spaces both on and off campus (such as satellite campus buildings) which must include any classrooms, labs, storage rooms, conference rooms, and the closets, cabinets, and drawers within those spaces and report any human remains and potential Native American cultural objects on the form below. Also work with your department's faculty and staff to ensure that any human remains or Native American cultural objects held in their office spaces are reported on this self-assessment. Please address any concerns about access to space or related issues to [ PRESIDENT'S NAGPRA DESIGNEE NAME, TITLE, PHONE, EMAIL ].

Human remains include any physical remains of a person such as bones, teeth, soft tissue samples, hair samples, DNA, and ashes. This also includes articulated skeletons that may be used for teaching. Casts of human remains should also be reported. Some examples of Native American cultural objects are pottery, textiles (i.e. clothing), basketry, stone tools, stone ornaments, bone tools, bone ornaments, shell tools, shell ornaments, glassware, metal objects, artifacts, etc. Any items that are known to originate

from archaeological sites should also be reported. Identification of human remains and Native American cultural objects may not be obvious; therefore, report anything that is questionable and requires the campus NAGPRA Coordinator’s assistance for identification.

**Submit the completed report to our campus NAGPRA Coordinator [ NAME, PHONE, EMAIL ], and copy to [ PRESIDENT’S NAGPRA DESIGNEE NAME, PHONE, EMAIL ] by [ DUE DATE ].**

**Self-Assessment:**

1. Please list the spaces on campus under the department/unit control that were physically inspected (i.e., room numbers, building spaces, etc.), the date the space was inspected, who inspected the space, and any relevant notes. Please attach additional pages if more space is needed.

Space Inspected	Date of Inspection	Name of Inspector	Notes

2. Following a physical inspection of the spaces (check one)

☐ I certify there are no human remains or objects in these spaces.

☐ I have located human remains or objects **OR** I am unable to readily identify the human remains or objects located in the spaces and need further assistance. Prepare and attach an itemized list based on visual inspections and gather existing documentation or information about the human remains and/or objects. Do not take photographs or handle the remains or objects. Instead provide written descriptions.

3. Do you control or share spaces/facilities that are off campus/off site?

☐ Yes

☐ No

4. If yes, please list the spaces/facilities that are off campus/off site that were physically inspected (i.e., room numbers, building spaces, etc.), the date the space was inspected, who inspected the space, and any relevant notes. Please attach additional pages if more space is needed.

Space Inspected	Date of Inspection	Name of Inspector	Notes

5. Following a physical inspection of the off-campus/off-site locations, (check one)

☐ I certify there are no human remains or objects in these spaces/facilities.

☐ I have located human remains or objects **OR** I am unable to readily identify the human remains

or objects located in the spaces/facilities and need further assistance. Prepare and attach a list based on visual inspections and gather any documentation or information about the human remains and/or objects. Do not take photographs or handle the remains or objects. Instead provide written descriptions.

6. If you responded that there are human remains or objects in your department/unit spaces or facilities on or off campus, please answer the following questions to help the NAGPRA team with follow ups:

- a. Approximate number of human remains or objects (DO NOT handle the remains or objects to provide an exact number, estimates are fine, as are more broad assessments such as number of boxes, drawers, cabinets, etc.):

- b. Do you know if the campus is the legal owner of the human remains or objects?

- c. If the campus is not the legal owner,

- i. Who is the legal owner?

- ii. What is the nature of the campus's possession of the human remains or objects (e.g., loaned, held in trust, MOA with government agency, unknown)?

iii. Is the current space where the human remains or objects are stored secure?

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iv. Please list the individuals with access to the human remains or objects:

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v. Please attach an itemized list and any additional information from department/unit records.

7. Check One:

☐ I, the report preparer/submitter, attest that our department/unit has **NO** human remains or objects of Native American origin. This is a full and true accounting to the best of my knowledge after thorough physical inspection of the spaces listed above.

☐ Our department/unit does **OR** may have human remains or objects of Native American origin. I, the report preparer/submitter, attest that this is a full and true accounting to the best of my knowledge after thorough physical inspection of the spaces listed above.

Name and Title	Email / Phone	Date