

STATEMENT OF QUALIFICATIONS FOR ACCESS TO CHRIS CONFIDENTIAL INFORMATION

The purpose of this form is to identify the professional qualifications standards under which an individual establishes eligibility for access to CHRIS Confidential Information as specified in Sections II and III and Appendix 2 of the CHRIS Information Center Rules of Operation Manual.

This Statement of Qualifications and a copy of the individual's professional curriculum vitae shall be filed at each CHRIS Information Center from which CHRIS Confidential Information is obtained. This Statement need only be submitted once to an Information Center.

Name: _____

Affiliation: _____

Address: _____ City/State/Zip: _____

Telephone: _____ Email: _____ Fax: _____

Secretary of Interior Standards (check applicable disciplines):

_____ Archaeology

_____ Architectural History

_____ Architecture

_____ Historical Architecture

_____ History

CHRIS Qualification Requirements (check if applicable)

_____ Landscape Architect

California State Personnel Board Specifications (check applicable positions):

_____ Associate State Archaeologist

_____ State Historian II

I understand that by signing this Statement of Qualifications I attest to my professional qualifications for access to CHRIS confidential information. I understand that any misrepresentation of facts herein shall result in denial of my access to CHRIS confidential information.

Signature

Date