

South Dakota Digital Archives Take-Down Policy Form

INFORMATION

Name: _____

Mailing Address: _____

City/Zip Code: _____

Phone: _____

Email: _____

Date: _____

DESCRIPTION

Please provide detailed information on your complaint/concern including either the identifier number, accession number and/or collection name and why you believe the image or images should be removed:

PROCESS

Upon receipt of a complaint/concern staff will:

- Acknowledge receipt of the complaint/concern
- Remove the item while the complaint/concern is investigated
- Investigate validity of the claim
- Contact the complainant concerning the findings

Possible outcomes include:

- The item is replaced on the archive's website without any changes.
- The item is replaced on the archive's website under restricted access.
- The item is permanently removed from the archive's website.

Please return completed form by mail, email or fax:

South Dakota State Archives
Attn: State Archivist
900 Governors Drive
Pierre, SD 57501

email: archref@state.sd.us
phone: 605-773-3804
fax: 605-773-6041

SIGNATURE:

DATE: