AILLA contact form - Existing Collection

Do you need a letter of collaboration for a grant application?

☐ Yes

☐ No

If Yes, do not complete this form. Complete the Collaboration Letter Request form instead. If No, complete the rest of this survey.

Surname(s) / Last Name

________________________________________________________________

Given name(s)

________________________________________________________________

Email

________________________________________________________________

Language name(s) and ISO code(s)

________________________________________________________________

Country(ies) where language(s) is/are spoken

________________________________________________________________

What is your timeline for depositing your data? Please provide as much detail as possible, e.g., when the materials will be ready for deposit, if you have a deadline to submit your collection for deposit or for making the collection available.

________________________________________________________________

________________________________________________________________

________________________________________________________________

________________________________________________________________

________________________________________________________________
Do you have a college or university affiliation?

- Yes
- No

**Display This Question:**
*If Do you have a college or university affiliation? = Yes*

College or university name

_________________________________________________________

Department name

_________________________________________________________

Do you have some other affiliation? (E.g., tribe, NGO, organization, etc.)

- Yes
- No

**Display This Question:**
*If Do you have some other affiliation? (E.g., tribe, NGO, organization, etc.) = Yes*

Other (non-university) affiliation

_________________________________________________________

Does your collection include **analog (physical)** materials?

- Yes
- No

**Skip To: End of Block If Does your collection include analog (physical) materials? = No**

Describe your **analog (physical)** collection (types and numbers of items such as audio or video tapes, discs, papers and manuscripts, notebooks, photographs, slides, negatives, maps, drawings, etc.).

_________________________________________________________

_________________________________________________________
What percentage of this **analog (physical)** collection would need to be restricted if it were added to AILLA?

What portion of your **analog (physical)** collection has already been digitized?

- [ ] All
- [ ] Some
- [ ] None

End of Block: Analog

Start of Block: Digital

Does your collection include **digital files** (either born-digital or previously digitized from analog)?

- [ ] Yes
- [ ] No

*Skip To: End of Block If Does your collection include digital files (either born-digital or previously digitized from analog... = No*

Describe your **digital** collection, specifically your data and format types (e.g., audio in .wav format, scans of field notes in .pdf format, etc.).

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________
What is the **total volume in GB** of the **digital** collection to be deposited?

________________________________________________

Total number of **digital** files to be deposited?

________________________________________________

Total number of **digital** folders (directories) that will contain these files?

________________________________________________

What percentage of the **digital** files will have to be restricted?

________________________________________________

End of Block: Digital

Start of Block: Speech Community

Total number of participants to be named in the metadata (including researchers, speakers, transcribers, translators, student employees, etc.)?

________________________________________________

Are you collaborating with the speech community(ies) to archive this collection?

- Yes
- No

Display This Question:
If Are you collaborating with the speech community(ies) to archive this collection? = Yes

Please describe your collaboration with the speech community(ies) to archive this collection.

________________________________________________

________________________________________________

End of Block: Speech Community
Start of Block: Funding

Do you currently have funding that will pay for your collection to be archived? (E.g., a grant, research funds, publication funds, etc.)

○ Yes

○ No

○ Maybe

Display This Question:
If Do you currently have funding that will pay for your collection to be archived? (E.g., a grant, ...

Yes
Or Do you currently have funding that will pay for your collection to be archived? (E.g., a grant, ...

Maybe

What kind of funding do you have?
If it is a grant, please provide the following details about that grant:
• funder
• grant number
• grant title
• PI name(s)
• start date
• end date

If it is not a grant, please explain what kind of funds you have to pay for archiving your collection.

________________________________________________________________
________________________________________________________________
________________________________________________________________

Display This Question:
If Do you currently have funding that will pay for your collection to be archived? (E.g., a grant, ...

Yes

Or Do you currently have funding that will pay for your collection to be archived? (E.g., a grant, ...

Maybe
Is there a deadline for spending these funds? (E.g., grant end date, end of fiscal year, calendar year, etc.)

- Yes
- No
- Other

Was your data collection supported by a grant that has now ended?

- Yes
- No

Display This Question:

If Was your data collection supported by a grant that has now ended? = Yes

Please provide the following details about that grant that has now ended:
- funder
- grant number
- grant title
- PI name(s)
- start date
- end date

____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

Do you have a collaboration letter from AILLA for this grant (either current or ended)?

- Yes
- No