Works of Art in Public Spaces: REQUEST FORM

This form governs requests in acquisition, modification, maintenance, transfer and/or deaccession of artwork.

Name: ___________________________________________ Date: ________________

Address: _______________________________________________________________________

Phone: ___________________________ Email Address: ____________________________

UHM Department or Affiliation: _________________________________________________

1. Request for (check one):

☐ Acquisition via (check one):

☐ HSFCA Art in Public Places Fund

☐ gift or donation

☐ purchase or commission

☐ exchange

☐ transfer

☐ Modification or Maintenance of existing Artwork

☐ Transfer of Artwork

☐ Deaccession of Artwork

☐ Artwork Loan

☐ to UHM from ____________________________

☐ From UHM to ____________________________

☐ Other Action: ________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________
2. Submit a brief overview of your request including the following details:

   a. Description of Artwork (attach image/s if appropriate)

   b. Identify Current or Proposed Location/Department (attach UHM map &/or building floor plan)

   c. Current Ownership of Artwork

   d. Available Funding and Source:

   e. Critical deadlines

   f. Duration – dates of installation -- for temporary exhibits

--- For office use only: do not write below this line ---

Request No.: ___________

Date of CAAC Review: (date of meeting and minutes recorded)

Request: ☐ approved ☐ denied, if so, why:

________________________________________________________________________________________

Action (Please attach separate sheet if necessary):

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

APPROVAL:

Signature: ____________________________  Date: ________________

Associate Vice Chancellor for Planning & Facilities