

**ACCESS AGREEMENT FOR ORAL HISTORY MATERIALS**

For use of this form see AR 870-5; the proponent agency is U.S. Army Center of Military History

**PRIVACY ACT STATEMENT**

**AUTHORITY:** Title 10, USC 3013, Secretary of the Army; Army Regulation 870-5, Military History: Responsibilities, Policies and Procedures.  
**PRINCIPAL PURPOSE:** To obtain historical information that focuses on persons, events, and topics of historical interest to the U.S. Army.  
**ROUTINE USES:** This information may be used by Department of Defense as source material for publications or other historical works.  
**DISCLOSURE:** Voluntary; however, failure to provide the requested information may preclude participation in the Army oral history program.

FROM

TO *(Include title of agency head)*

1. I, \_\_\_\_\_, am voluntarily participating in an oral history conducted by \_\_\_\_\_ of the \_\_\_\_\_  
*(Name of interviewer)*  
\_\_\_\_\_  
*(Name of agency)*  
on the following date(s) : \_\_\_\_\_.

2. I understand that the recording(s), transcript(s), and photograph(s), and any materials resulting from this oral history will belong to the U.S. Government to be used in any manner, consistent with federal law, deemed in the best interests of the U.S. Army, as determined by the Chief of Military History or his/her designee.

3. I understand that the recording(s), transcript(s), photographs(s), any other materials, and information and material derived from them, may be made available to members of the public, subject to the Freedom of Information Act, Privacy Act, and DA Information Security Program.

4. I hereby expressly and voluntarily relinquish all rights and interests in the recording(s), transcript(s), photograph(s), and any other materials resulting from the oral history to the U.S. Army. This grant, release, and discharge of rights to the U.S. Army is made without the expectation of recompense of any kind. This voluntary grant and release will not be made the basis of a future claim of any kind against the U.S. Government. Finally, I understand that this does not preclude my personal use of these materials, subject to security restrictions.

NAME OF INTERVIEWEE

DATE

ACCEPTED ON BEHALF OF THE U.S. ARMY BY

DATE