Stó:lō Research and Resource Management Centre
Research Registry Purpose and Procedures

Purpose:
The purpose of the Research Registry is to coordinate research projects involving the staff and resources of the Stó:lō Research and Resource Management Centre (SSRMC) and to protect Stó:lō history and culture.

In addition, researchers who plan to involve Stó:lō community members should register their research proposal with the SSRMC so that researchers can make use of pertinent oral history and research already in the Stó:lō Archives collection. Guidance will be provided to ensure that interviews are conducted in an appropriate manner.

Application Procedures:

Upon request, the SSRMC Librarian will send the applicant(s) the Research Registry Application form. Please return the completed form to the librarian along with a cheque or money order payable to Stó:lō Nation to cover processing costs:

Thirty five dollars ($35.00) for BA or MA students.
One hundred dollars ($100.00) for all others.

Completed applications should be returned to:

Tia Halstad / Librarian
Stó:lō Archives
Bldg. 7 - 7201 Vedder Road
Chilliwack BC
V2R 4G5

The librarian will ensure that appropriate staff members are asked to review the request. Normally, the review process will take no more than two weeks. The reviews will be forwarded to the Manager for a decision on whether or not the SRRMC is able and willing to be involved in the project and the researcher(s) will be notified of the decision.

At the discretion of the Manager, a teleconference or meeting may be arranged between the researcher(s), the Manager and/or the reviewers.

A copy of the researcher’s final project and any oral interviews, transcripts or notes must be submitted to the Stó:lō Archives upon completion.

For further information or if you have any questions about or concerns with the application please contact the librarian at 604-824-5105, 1-800-665-3224 or via email at Tia.Halstad@stolonation.bc.ca
Stó:lō Research and Resource Management Centre

Research Registry Application

Name(s) of Researcher(s): __________________________________________________

Date of Application: _______________________________________________________

Telephone Number: Home: ____________ Work: ____________  Fax: ____________

Email: __________________________________________________________________

Institutional Affiliation: ____________________________________________________

Title of Research Project: ___________________________________________________

Research Period (DD/MM/YY): _____________________________________________

Discipline/ Field of Research: _______________________________________________

Project Funding Source(s): _________________________________________________

Final Form of Research Project (Copy to be submitted to Stó:lō Archives with copies of interviews and, if prepared, transcripts of the interviews.)

Written Report: _____ Videotape: _____ Maps: _____
Photographs: _____ Audiotape: _____ Other: _____(please specify)

Please attach a description of your research project and the methods you propose to use. What do you hope to learn? What type(s) of material do you hope to find in the SSRMC (e.g. photographs, books, previously recorded oral history)? How will the Stó:lō be involved in planning and conducting the research? What are your future plans for your research data?

A copy of your curriculum vitae should be enclosed with this application.

Personal information on this form is protected in accordance with Canadian and Provincial (British Columbia) legislation. If you have any questions about your privacy, please contact Tia Halstad at 604-824-5105