

## Preliminary Oral History Interview Agreement

### Interviewee

The mission of the Center for History of Physics is to preserve and make known the history of the physical sciences. The Center is part of the American Institute of Physics (AIP), a non-profit organization. In pursuit of its mission, the Center is conducting an oral history in which you are participating as an interviewee. The purpose of this agreement is to allow the Center to transfer the contents of this interview to other media for purposes of transcription and editorial review. I agree to be interviewed by the interviewer(s) named below, representing AIP, on the date(s) \_\_\_\_\_. I agree to allow copies of the interview to be made for purposes of transcription and review.

I understand that my oral history interview will be made part of AIP's collections and will be available for educational, non-commercial use. I also understand that this document is intended to inform me fully of what I am being asked to do and of my rights as an interviewee.

### The Oral History Interview

This interview will be recorded within the period of time previously agreed upon by me and the interviewer(s). Should the interviewer(s) feel that more time is needed to complete the interview, arrangements can be made to extend the interview at my convenience. Once my interview is complete, it will be transcribed and edited for readability in accordance with AIP's policies and procedures. I will be given an opportunity to make changes to my interview before the final transcript is completed. No one outside of the AIP, its contractors, and the interviewer(s) will be able to access my interview until the final transcript is finished. At that time I will have the opportunity to request restrictions on access and reproduction of the interview if I so desire, on the **Oral History Interview Access Agreement**.

### My Rights

I understand that I have the right not to answer any of the questions asked of me during the interview should I consider them uncomfortable or inappropriate. If I need to take a break from the interview or if I have a question or point for clarification during the interview, I can ask that the recorder be turned off temporarily. My participation in this interview is completely voluntary and I am free to withdraw consent and cease all participation in this interview at any time without any consequences whatsoever.

### Risks, Benefits, and Costs

AIP knows of no risks or negative consequences associated with participation in this interview, and I may not receive any direct benefit from my participation, but I am fully aware that others may benefit from the knowledge I provide in this interview for AIP's oral history collection. I understand that there is no cost to participate in this interview and I will not be paid for my time; I will, however, receive a copy of my interview.

### My Obligations

Once the History Center has sent me a copy of my oral history transcript, I agree that (a) I will return the transcript with my edits to AIP within three months of its receipt by me along with the signed **Oral History Interview Access Agreement**. Moreover, I agree that (b) should I not return the edited transcript and **Access Agreement** within that time, AIP may complete the processing of the transcript and make it available in accordance with the History Center's normal practices. I also agree that if I should die or become incapacitated before I have reviewed and returned the transcript and **Access Agreement**, all

rights and title to and interest in the recordings, transcript, photographs, and memorabilia, including the literary rights and copyright, shall be transferred to the American Institute of Physics, which pledges to maintain the recording and transcript and make them available in accordance with general policies for research and other scholarly purposes.

**Questions or Concerns**

Should I have any questions or concerns about participating in the creation of this oral history before or during the recording of the interview, or about the processing of the transcript, I can contact the Oral Historian of the Center for History of Physics at the American Institute of Physics:

Dr. David Zierler  
Center for History of Physics  
American Institute of Physics  
1 Physics Ellipse  
College Park, MD 20740 Tel:  
+301-209-3160  
E-mail: [dzierler@aip.org](mailto:dzierler@aip.org)

**Agreement**

I have read the information contained within this release form. The interviewer(s) has/have offered to answer any questions or concerns I had about this document or the interview. I hereby consent to participate in this oral history interview.

Print Name of Interviewee: \_\_\_\_\_

Signature of Interviewee: \_\_\_\_\_

Print name(s) of Interviewer(s): 1) \_\_\_\_\_

2) \_\_\_\_\_

Signature(s) of Interviewer(s): 1) \_\_\_\_\_

2) \_\_\_\_\_

Date: \_\_\_\_\_