Use only for **human remains** or **associated funerary objects** in a holding or collection of a museum or Federal agency after inviting consultation (see by [43 CFR 10.10(b)](https://www.ecfr.gov/current/title-43/part-10#p-10.10(b)) *Step 2 – Initiate consultation*).

Use this template to prepare a record of consultation as required by [43 CFR 10.10(c)](https://www.ecfr.gov/current/title-43/part-10#p-10.10(c)) *Step 3 – Consult on human remains or associated funerary objects*. Consultation may continue until the museum or Federal agency sends a repatriation statement, and additions to a record of consultation may be necessary as consultation continues.

**Insert the following seven pieces of information** in the appropriate places in this template, indicated by {#. Information and additional instructions}. This is the MINIMUM information required; additional information may be included as necessary or preferred. The format is only a recommendation and not a requirement.

1. Museum or Federal agency. *Full name can be abbreviated or referred to by initials after the first instance, i.e. Museum of Natural Science (MONS).*
2. Consulting parties, individually named or in attached list. *This includes any lineal descendant(s) and any Indian Tribe(s) or Native Hawaiian organization(s) with potential cultural affiliation. Titles or individual names are optional. Names of lineal descendant may be withheld.*
3. Initiation of consultation. *Use this section to make a record of written invitations to consult. Note where invitations to consult can be located.*
4. Response to invitation to consult. *Record response, no response, and any deference to other parties. Include information provided by consulting parties for preference on method and timeline for consultation, authorized representative, traditional religious leader, and known lineal descendant who may participate in consultation.*
5. Requests for additional information. *Record any requests for additional information made by any consulting party.*
6. Consultation sessions, including date, type, and goals of each session. *Identify participation by {1. Museum or Federal agency representatives by title or name} and representatives of the lineal descendants/Indian Tribes/NHOs as {2. Specific consulting parties involved}.*
7. Results of consultation, including additional topics as necessary or required. *A record of consultation must describe the concurrence, disagreement, or nonresponse of the consulting parties to the topics addressed during consultation.*

**REMOVE** these instructions, highlighting, italics, and {braces}.

**Protect sensitive information**, as identified by consulting parties, from disclosure to the general public to the extent consistent with applicable law. Retain a record of consultation until sending a repatriation statement for the human remains or associated funerary objects.

**DO NOT** send to the National NAGPRA Program.

**Record of consultation between {1. Museum or Federal agency} and {2. Consulting parties}**

Updated

Date, initials

Date, initials

**Initiation of consultation.**

{3. *Use this section to make a record of written invitations to consult. Add to this section if additional consulting parties are identified and invited.*} Copies of each invitation to consult are on file.

**Response to invitation to consult**

*{4. Use this section to track responses and repeat as needed. Table format is only a suggestion.*}

|  |  |  |  |
| --- | --- | --- | --- |
| **Consulting party** | **Response** | **No Response** | **Deferred** |
| *Tribe A* | *X or Date* |  |  |
| *Tribe B* |  | *X or Date* |  |
| *Tribe C* | *X or Date* |  | *X or Date to Tribe A and E* |
| *Tribe D* |  | *X or Date* |  |
| *Tribe E* | *X or Date* |  |  |
| *Tribe F* | *X or Date* |  |  |

{*Include the following information for each consulting party. If not provided, specifically request the following information. Table format is only a suggestion.}*

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Consulting party** | **Timeline preference** | **Method preference** | **Authorized representative** | **Traditional religious leader** | **Lineal descendant** | **Notes** |
| *Tribe A* | *Before ceremonial date* | *Zoom or phone only* | *Person A, phone, email only* | *None* | *None* |  |
| *Tribe C* | *None* | *None* | *Person B, phone, email* | *None* | *None* | *Defers to Tribe A and E* |
| *Tribe E* | *After ceremonial date* | *In person only* | *Person C, physical mail only* | *Person E, name*  | *Person G, name* | *contact only through Person C* |
| *Tribe F* | *Any* | *Any* | *Person D, name, phone, email, address* | *Person F, name, phone, email, address* | *Person H, name, phone, email, address* |  |

**Requests for additional information**

{5. *Include any requests from consulting parties for additional information. This may include records, catalogues, relevant studies, or other pertinent data and must be provided in a reasonable manner and for the limited purpose of determining cultural affiliation, including geographical location or acquisition history.*}

**Consultation sessions**

Consultation was conducted on the following dates:

{6. Month, Date, Year: Preliminary exchange of information by phone/video/email to discuss how to best facilitate and schedule the consultation process.} Participants included {1. Museum or Federal agency representatives by title or name} and representatives of the lineal descendants/Indian Tribes/NHOs: {2. Specific consulting parties involved}.

{6. Month, Date, Year: In person exchange of information at facility. The goal of the meeting was {physical inspection, collection review, etc.}.} Participants included {1. Museum or Federal agency representatives by title or name} and representatives of the lineal descendants/Indian Tribes/NHOs: {2. Specific consulting parties involved}.

{6. Month, Date, Year: Exchange of information by phone/video/email to discuss cultural affiliation and duty of care accommodations.} Participants included {1. Museum or Federal agency representatives by title or name} and representatives of the lineal descendants/Indian Tribes/NHOs: {2. Specific consulting parties involved}.

In addition to the sessions identified above, consultation was carried out via telephone and email between {1. Museum or Federal agency representatives by title or name} and representatives of the lineal descendants/Indian Tribes/NHOs: {2. Specific consulting parties involved}. Copies of email correspondence are on file.

{*Add any additional information as needed and add to this section if additional consulting parties are identified.*}

**Results of consultation**

{7. *Suggested table format, but any format that includes the necessary information is sufficient. Add or revise topics as necessary or required.}*

*{Example results of consultation recorded below. Note Tribe C deferred to two other Tribes in response to the invitation to consult, and is therefore included as concurring only in some instances; otherwise recorded as nonresponse when deferring Tribes disagreed.}*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Topic** | **Determination** | **Concurrence** | **Disagreement** | **Nonresponse** |
| *Lineal descendants* | *None identified* | *Tribe A**Tribe C (deferred)**Tribe E**Tribe F* | *None* | *Tribe B**Tribe D* |
| *Cultural affiliation* | *Clearly identified to Tribe A, B, C, D, E, and F**\*as consensus was not reached, museum will proceed with publication of a notice to identify all Indian Tribes with cultural affiliation.*  | *Tribe A**Tribe F* | *Tribe E\***After a notice is published, Tribe E may make a competing request for repatriation.* | *Tribe B**Tribe D**Tribe C (deferred to Tribe A and E who disagree)* |
| *Associated funerary objects* | *All objects from a burial site are associated**\*as consensus was not reached, museum will proceed with including all objects as associated funerary objects.*  | *Tribe A**Tribe F* | *Tribe E\** | *Tribe B**Tribe D**Tribe C (deferred to Tribe A and E who disagree)* |
| *Duty of care: storage, treatment, or handling* | *Separate room, no handling* | *Tribe A**Tribe C (deferred)**Tribe E**Tribe F* | *None* | *Tribe B**Tribe D* |
| *Duty of care: requested accommodations* | *Wrap all boxes in red cloth; if not possible, cover shelving units in red cloth.* | *Tribe A**Tribe C (deferred)**Tribe E**Tribe F* | *None* | *Tribe B**Tribe D* |
| *Duty of care: exhibition, access, and research* | *No consent to any exhibition or research. Access granted to museum staff only to wrap boxes and shelves in red cloth. All other access must be restricted until disposition/repatriation occurs.* | *Tribe A**Tribe C (deferred)**Tribe E**Tribe F* | *None* | *Tribe B**Tribe D* |