University of Florida Historical Marker Program Application  
(Please complete all sections of the application)

Historical resource to be recognized __________________________________________

Type of historic resource:

_____ Program/Project    _____ Invention/Discovery
_____ Structure          _____ Individual
_____ Site               _____ Other

Suggested marker title (Five words or less) ________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Location of historical resource  (Please note if location is off-campus)
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Is the resource currently part of any other marker series? ______________________

Is the location accessible and visible to the public? _____ Describe any possible restrictions to access __________________________________________

Statement of Significance
Briefly explain the historical significance of this resource to the University of Florida. Use additional sheets if necessary.

________________________________________________________________________

________________________________________________________________________
**Marker Text**
On an attached sheet, please submit the proposed text for the historic marker. The title and text must be typewritten and no longer than 125 words.

**Required Documentation**
Please submit the following information with the completed form.

**Major bibliographical references:** Cite and attach pages from books, pamphlets, records, articles, and other sources that provide historical evidence and descriptive information about the resource.

**Maps:** A map and site plan showing where the marker should be placed in relation to the historical resource and to ensure maximum visibility.

**Photographs:** Submit a recent photo of the historical resource, if it exists, or a photo of the site of historical significance for the resource.

**Form Prepared By**

Name(s): ________________________ Title: ________________________________

E-mail address(es): ______________________________________________________

Address: ________________________ Phone: ______________________________

City/Town________________________ State ________ Zip Code ____________

Please mail to: University of Florida History Advisory Council, 101 Tigert Hall, Box 113156, University of Florida, Gainesville, FL 32611-3156.

Proposals will be reviewed monthly by the UF History Advisory Council. All production decisions will be made by the Council.