



# CULTURAL RESOURCE MANAGEMENT CONSULTANT RESPONSE FORM

Name: \_\_\_\_\_

Name of firm: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_

Cell: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Website address: \_\_\_\_\_

Please provide one (1) copy (pdf or hard copy) of the following information: cultural resource management consultant response form and a current curriculum vita (CV). CV should include information detailing academic credentials, experience in architectural or archaeological research, administration, or management. For architectural historians/historians/historic architects, provide information detailing academic credentials, experience in research, writing, teaching, interpretation, or other demonstrable professional activity with an academic institution, historical organization or agency, museum, or other professional institution. For architecture/historic architecture, provide information on state license/registration. For archaeologists, indicate supervised field and analytic experience in general North American archaeology. Respondent should demonstrate ability to carry research to completion. Please also indicate the amount of professional experience at a supervisory level for the study of archaeological resources of the prehistoric and historic periods.

Please indicate the following areas of expertise that you as an individual meet according to the Secretary of Interior's Professional Qualification Standards:

History: \_\_\_ Archaeology: \_\_\_ Architectural History: \_\_\_ Architecture: \_\_\_ Historic Architecture: \_\_\_

Please indicate which of the following services you as an individual are qualified to provide:

#### ARCHITECTURAL/HISTORICAL SERVICES:

National Register Nomination: \_\_\_  
Multiple Property Document Form: \_\_\_  
NR Nominations for Underrepresented Communities: \_\_\_  
Architectural Survey: \_\_\_  
Historic Context: \_\_\_  
Historic Landscape Assessment/Nomination: \_\_\_  
Historic Tax Credit Applications: \_\_\_  
Architect/Design Services: \_\_\_  
Historic Properties Maintenance Plans: \_\_\_  
Section 106 Agreement Documents: \_\_\_  
HABS/HAER Documentation: \_\_\_

#### ARCHAEOLOGICAL SERVICES:

Cultural Background Desktop Review: \_\_\_  
Remote Sensing/Geophysical Survey: \_\_\_  
RS/GS Methods Provided (list below or on attached sheet):  
Phase I Cultural Resources Survey: \_\_\_  
Phase II Archaeological Significance Testing: \_\_\_  
Phase III Mitigation of Adverse Effect: \_\_\_  
Archaeological Site Monitoring: \_\_\_  
Cultural Resource Management Plan: \_\_\_  
Section 106 Agreement Documents: \_\_\_

Please return one (1) copy (pdf or hard copy) of the completed response form and CV to:

Email to [moshpo@dnr.mo.gov](mailto:moshpo@dnr.mo.gov) or mail to  
Department of Natural Resources State Historic Preservation Office  
P.O. Box 176, Jefferson City, Missouri 65102