

Louie B. Nunn Center for Oral History
Interview Information Form

Project: _____

Interview Date: _____

INTERVIEWEE INFORMATION

Last name: _____ **First name:** _____

Middle name: _____ **Former name(s)** _____

Address: _____

Phone: _____ **Email:** _____

Birth date (Optional): Month: _____ Day: _____ Year: _____

INTERVIEWER INFORMATION

Last name: _____ **First name:** _____

Middle name: _____ **Former name(s)** _____

Address: _____

Phone: _____ **Email:** _____

TECHNICAL INFORMATION (Check all that apply and leave blank anything you do not know):

Length of interview (hh:mm:ss): _____ **Format of interview:** Audio _____ Video _____

Audio Format: .wav _____ .mp3 _____ .aiff _____ Other _____

Audio Settings Bit Depth _____ Sample Rate _____ Bit Rate _____

Video Type: High Def _____ Standard Def _____

Video Format MiniDV _____ HDV _____ .avi _____ .mov _____ .mp2 _____ .3gp _____
.mp4 _____ .m4v _____ .mts _____ .mxf _____ Other _____

Does this Interview span multiple files/media types? Yes _____ No _____ If so, how many? _____

Transfer Medium: Flash Card _____ Tape _____ CD/DVD _____ Hard Drive _____
Flash/Thumb Drive _____ FTP _____ Other _____

File Names: _____

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DESCRIPTIVE INFORMATION

Synopsis: Please use 3-5 sentences to describe topical content and themes articulated in the interview. Try to envision what a future researcher would want to read in a summary about this interview to give them an idea of what information is contained in the content of this interview. Continue on an extra attachment if necessary:

Keywords: Please list 5 to 10 subjects discussed in the interview. As above, try to anticipate what keywords would connect future researchers to the information in this interview. Feel free to be broad and specific (i.e. “Childhood” or “Frankfort, Kentucky”):

Proper Names:

Below, please spell out any proper names (people, places, organizations, etc) that come up during the course of the interview.