

THE TEXAS FREEDOM COLONIES PROJECT

STORYTELLER SURVEY

(Short Survey Form) UVA IRB-SBS # 5460]



Dear Participant,

Before sharing your story, please review The Texas Freedom Colonies Project research info and permission and licensing agreement at <https://www.thetexasfreedomcoloniesproject.com/user-agreements>. Completion of this form and return of the form to the researcher represents consent to participate in the study. You must be 18+ years to participate.

To learn more about freedom colonies visit the project's website:
<http://www.thetexasfreedomcoloniesproject.com>

To submit by E-mail:

Email the scanned completed forms to:
freedomcoloniesproject@gmail.com

To submit by mail:

C/o Dr. Andrea R. Roberts
School of Architecture,
Campbell Hall PO Box 400122,
Charlottesville, VA 22904,

Share your community's story!

Name (First, Last):

Email Address:

Zip Code:

How did you hear about the Texas Freedom Colonies Project?

☐ Public Event

☐ TV/Radio

☐ Other _____

☐ Social Media

☐ Word of Mouth

Please enter the name of your settlement, its nearest major city, and the county in which it's located.

Freedom Colony Name: _____

County Name: _____

Nearest Major City: _____

Freedom Colony's Location: Please write the address, directions, or the latitude and longitude of your settlement.

Tell Your Settlement's Story: Please share the story of your settlement (origin story, history, population, family names, traditions, events, church, cemetery, and school name, etc.)

Please provide the names of people, books, articles, maps, brochures, or other sources used to support your survey answers.

Additional Documents: Please attach any documents you want to share related to your settlement (images, documents, etc.) to this form. Copies are adequate. We will not return original materials.