Request to use Copyrighted Material

[return address]

[date]

[name and address of addressee]

Dear \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_:

I am developing \_\_\_\_\_\_\_\_\_\_\_ [name/type of course/project] for the [name of school]. I would like your permission to reproduce and distribute \_\_\_\_\_\_\_ [within a password-protected online environment] excerpts from [or, the image/multimedia/graph/chart, etc. from] the following:

 [insert full citation and description of the original work]

 The excerpts [or photograph/multimedia, etc] to be reproduced are: [attach copy or insert detailed explanation].

The requested permission extends to any future revisions and editions of the course, including non-exclusive world rights in all languages. The course’s protected environment is solely accessible by registered students. Full credit to the original source will be given. These rights should in no way restrict republication of the material in any other form by you or by others authorized by you. Your signing of this letter will also confirm that you own [or your company owns] the copyright to the above-described material.

If these arrangements meet with your approval, please sign this letter where indicated below and return it in the enclosed return envelope. Mail to:

Name

Title

School

Address

Thank you very much.

Sincerely,

[your name and signature]

PERMISSION GRANTED FOR THE USE REQUESTED ABOVE:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[type name of addressee below signature line]

Please indicate the correct spelling and any title / department / school information that you would like included in the credit statement:

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Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

NOTE: if permission is being sought from a publishing house use the following signature format:

[type name of company]

By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_