

**Authorization To Reproduce Printed Material**  
*(to be completed only by an employee of University of California)*

Course ID#/Ref.# \_\_\_\_\_ Department/Office \_\_\_\_\_

I certify that I am an employee of University of California and that I have read and understand University of California's Guidelines for the Reproduction of Copyrighted Materials for Teaching and Research and the January 18, 1995 revision of BUS-53, Guidelines for Reprographic Units. I understand that Digital Copy Services at UCSC strives to operate in compliance with these guidelines and that their policy is to not reproduce copyrighted materials in any way contrary to University policies. I am aware that section VI of BUS-53 assures that Digital Copy Services is not responsible for interpreting copyright law or determining the copyright status of the material I am submitting for reproduction.

I also certify that one of the following statements is applicable to the material that I am submitting for reproduction:

- 1) \_\_\_\_\_ I have received permission from the legal copyright holder to reproduce  
*(initial)* the material I am submitting for reproduction, (if the material is a complete work, I am also submitting the original written permission documents from the legal copyright holder that explain the conditions for reproduction).
  
- 2) \_\_\_\_\_ I own copyright to this material.  
*(initial)*
  
- 3) \_\_\_\_\_ I have determined that the materials I am submitting for reproduction  
*(initial)* meet the requirements of "fair use" and/or are in the public domain.

I have determined that copyright clearance through Professor Publishing Services is not necessary for the reason I have indicated with my initials immediately above this paragraph. I am aware that I am solely responsible for determining the copyright status of the material I am submitting for reproduction in accordance with the policies indicated above in the first paragraph of this form and I assume full responsibility for any violation of University policy.

Signer's Name \_\_\_\_\_ Faculty  Staff  TA   
*(please type or print name of signer)*

Signature \_\_\_\_\_ Date \_\_\_\_\_