



Permission Request Form to Add Closed Captioning to Copyrighted Materials

Date:	College/University Contact Information
Copyright Owner (Attn. Permissions Department)	

Dear Permissions Department,

This letter is requesting permission to modify the following materials to include captioning for students attending non-profit, public educational institutions in the Minnesota State Colleges and Universities System.

(College/University name) will incur the costs associated with the addition of the closed captioning. **Please complete the bottom portion of this form and FAX or mail to the address above.**

The materials to be captioned:

This request is time sensitive and requires an immediate response.

May we add captioning to the identified materials? Yes No

May we digitally archive the modified materials for future use by students? Yes No

If a captioned version is available, please provide the appropriate ordering information.

Closed caption materials available at:

Cost:

Ordering information:

_____ College/University requests permission to modify the above materials to include captioning for the purpose of ensuring access for all students in accordance with Section 504 of the Rehabilitation Act and Section 363A.13 of the Minnesota Human Rights Act. The materials will be used for student instruction in perpetuity *unless the copyright owner identifies an expiration date*. The authorization and authorization date will be placed on the materials (along with any expiration date).

Permission Department Authorized Signature

Date

Print Name

Title

Company Granting Permission

Expiration date (if applicable)

Thank you for your timely response to this request.

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