



Touro College and University System Author's Deposit Agreement

(Adapted from University of Michigan's Agreement and Marquette University Graduate School Publishing Document)

I hereby grant to Touro College and University System the non-exclusive right to retain, reproduce and distribute the deposited work(s) (henceforth referred to as the Work(s)), in and from its (their) electronic format. **This agreement does not represent a transfer of copyright to Touro College and University System.**

Touro College and University System may make and keep more than one copy of the Work(s) for purposes of security, backup, preservation and access, and may migrate the Work(s) to any medium or format for the purpose of preservation and access in the future. Touro College and University System will not make any alteration, other than as allowed by this agreement, to the Work(s).

I represent and warrant to Touro College and University System that the Work(s) is (are) my original work. I also represent that the Work(s) does (do) not, to the best of my knowledge, infringe or violate any rights of others. For quoted material, including, but not limited to, text, images and graphs, I believe such usage falls within fair use or I have obtained permission for use. I understand that any copyright violation is mine and that Touro College and University System shall be held harmless.

I further represent and warrant that I have obtained all necessary rights to permit the Touro College and University System to reproduce and distribute the Work(s) and that any third-party owned content is clearly identified and acknowledged within the Work(s).

By granting this license, I acknowledge that I have read and agreed to the terms of this agreement and all related policies.

By checking this box and entering your name in the box below, you are effectively providing your signature, indicating that all the information on this form is true and accurate, to the best of your knowledge.

Print Name: _____

Signature: _____ Date: _____

Also complete below if student submission

Print Faculty Advisor Name: _____

Faculty Advisor Signature: _____ Date: _____