**Permission for a TAFE Administering Body to Reproduce Works Created by Students**

A TAFE administering body (‘**the administering body’**) will sometimes reproduce works that have been created by TAFE students at a TAFE institute. The purpose of this form is to obtain your consent to use a work or works created by you, on the terms set out below.

If you agree to grant the requested permission, please complete and sign this form and return a copy to [NAME AND UNIT] at the following email address [INSERT EMAIL ADDRESS].

If you are not the rights holder of the Work, we would appreciate it if you would provide us with any contact information you have about the rights holder.

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| **Work(s)** | [INSERT NAME OR DESCRIPTION OF STUDENTS WORK OR WORKS] |
| **Year the Work(s) was/were created** | [INSERT YEAR] |
| **Name** | [INSERT STUDENT NAME] |
| **Address**  | [INSERT STUDENT ADDRESS] |
| **Telephone Number/s** | [INSERT STUDENT TELEPHONE NUMBERS] |
| **Email address** | [INSERT STUDENT EMAIL ADDRESS] |

1. I confirm that I own copyright in the Work(s).
2. I hereby grant the TAFE administering body a non-exclusive, irrevocable, perpetual, royalty free licence (including the right to sub-licence) to use, reproduce, communicate, perform, adapt, develop and translate the Work(s) for the following purpose(s):
	* 1. [insert description of the purpose]; *[****Include the purpose as well as where the work will be shared e.g. "sharing on the TAFE administering body website for promotional purposes" or "for inclusion in TAFE administering body materials such as newsletters presentations and training materials for training and promotional purposes]***
		2. [insert any further purpose].
3. I acknowledge that I have moral rights in the Work(s).
4. I voluntarily and unconditionally:
	* 1. consent to any acts or omissions by the administering body, or persons authorised by the administering body, that would otherwise infringe my moral rights in the Work(s); and
		2. waive my moral rights in the Work(s).
5. Should the administering body wish to credit me for the Work(s), I ask that I be credited as follows: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

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| **Student/Staff Name**  | **Signature** | **Date** |
| **Parent/Legal Guardian (if student under 15)** | **Signature**  | **Date** |