

Sarah Lawrence College Undergraduate Copyright and Distribution Agreement Form

Student Name: Rachel St. Ours

_____ Title
of Work: **Catalog of Potential COVID-19 Literature** Faculty Member (to whom was this work submitted for credit): **David Hollander** Course (for which course was this work submitted): **Building a Better Matrix: A Fiction Writing Workshop** Semester (fall/spring and year): **Spring 2020**

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Signature: *Rachel St. Ours*

Email: rstours@gm.slc.edu

Date: 5/29/20

AUTHOR CONTACT INFORMATION (to be used even after you graduate)

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FACULTY MEMBER’S SIGNATURE I am aware of the distribution option my student has made
Please check one:

I approve this choice _____

Another option is more appropriate. Please choose : 1 2

I understand that if my student and I disagree about the best choice of distribution option Sarah Lawrence College Library will adopt whichever of our choices is the more restrictive.

Signature: Email:



6-9-2020

Date:

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