

Web Publisher Authorization Form

Name: _____

E-mail address: _____

Phone number: _____ Campus box: _____

T-Number: _____

Department: _____

Department Chair/Director: _____

Requesting Access to What Area: _____

By signing, I agree to follow the Web Publishing Policy and its supplemental materials. I agree that under no circumstances may copyrighted material be used without prior authorization. If I do not own the material, have not paid for the material, or cannot determine if it is in the public domain, I will not use it. I agree that I am responsible for evaluating the credibility of web pages for which I am granted access, and I will be held accountable in cases of fraud and similar misrepresentation. I acknowledge that the web is a publication and therefore standards of legitimacy and accuracy that apply to publications must also be enforced. I realize that the web reflects upon the University as a whole, and therefore it must reflect its beliefs and Mission. Pursuant to the Web Publishing Policy, the University reserves the right to impose restrictions and guidelines at any point upon departments or units, individually or as a whole. I acknowledge that it is my responsibility for protecting web pages for which I have been granted access and my computer as a whole from unlawful intrusion. This includes protecting passwords and exercising good judgment when adding information to any pages.

Web Publisher Signature

Department Chair/Director Signature

Web & Digital Media Director Signature

Please send to:

Web & Digital Media Director

Campus Box 5056

For questions, e-mail _____@ch.edu

