

## Elihu Burritt Library Thesis & Dissertation Public Access Approval Form

**Student Name:** \_\_\_\_\_  
(Last) (First) (Middle) (Year of Birth)\*

**E-mail Address:** \_\_\_\_\_ **Phone Number:** \_\_\_\_\_

**Type:**  Master's Thesis  DNAP Doctoral  
Scholarly Project  Ed.D. Dissertation

**Title:** \_\_\_\_\_

### Student Agreement for Public Access Through Digital Repository

I give permission /  I do not give permission to Elihu Burritt Library, Central Connecticut State University to provide public access to my thesis or dissertation or scholarly project through the Digital Repository. Note: access to theses, dissertations, or scholarly projects for which permission for public access has not been granted will be restricted to authorized members of the CCSU community.

*Changes to this Digital Repository agreement should be made in writing to: Information Systems and Resources, Elihu Burritt Library, Central Connecticut State University; 1615 Stanley Street; New Britain, Connecticut 06050*

_____	Student Signature	_____	Date
_____	Advisor Signature	_____	Date
_____	Dean or Program Director's Signature	_____	Date

**Advisor's signature is required for remote access through the Digital Repository and for access through Interlibrary-Loan.**

**Please send to School of Graduate Studies with Student and Advisor signatures.**

### Questions?

Please feel free to contact Dana Hanford, Associate Librarian with any questions you may have. She can be reached at [hanfordd@ccsu.edu](mailto:hanfordd@ccsu.edu) or (860) 832-2058.

\_\_\_\_\_  
\* Year of birth is required to allow the library to create a unique identifier for your name while cataloging your thesis, dissertation, or scholarly project. This identifier, called an Authority Record, serves to disambiguate you from other individuals who might share your name.

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