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**UVM LICENSING WAIVER**

*INTERNAL REQUESTS*

**Date:**

**University Department or Organization:**

**Name:**

**Email:**

**Phone Number:**

**Product will be:**

**Resold:**

**Given Away:**

**Internal Use:**

**Product will be used for:**

**Promotional purposes:**

**Fundraiser:**

**Social Event Giveaway:**

**Other:**

**Type(s) of Product:**

**Quantity:**

**Total Cost:**

**Are you using a licensed vendor (Y/N):**

**Company Name:**

**Description of Art:**