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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:**