**REQUEST FOR PERMISSION TO REPRODUCE SACE BOARD MATERIAL**

**APPLICANT DETAILS**

Name: Click here to enter text. Position: Click here to enter text.

Organisation: Click here to enter text.

Address: Click here to enter text.

Phone: Click here to enter text. Facsimile: Click here to enter text.

Email: Click here to enter text.

Subject teacher association:  Non-profit organisation:

**SACE BOARD MATERIAL YOU WISH TO PRODUCE**

*(Please included a copy of the material you wish to reproduce)*

Title: Click here to enter text.

Author  
*(if applicable)*:Click here to enter text. Edition: Click here to enter text.

Year of publication: Click here to enter text. ISBN/ISSN: Click here to enter text.

Pages: Click here to enter text.

**DETAILS OF PROPOSED PUBLICATION**

*(Please include a copy, showing how you intend to use the SACE Board’s material)*

**Publication details**

Working title: Click here to enter text.

Author  
*(if applicable)*:Click here to enter text. Edition: Click here to enter text.

Proportion composed of SACE Board material: Click here to enter text.

Book/booklet  CD-ROM  DVD  Periodical  Newsletter/brochure

Website URL where content will appear: Click here to enter text.

Can be  Can be  Interactive  Open access  Restricted

printed downloaded access

Briefly describe how your site will use the SACE Board material: Click here to enter text.

Click here to enter text.

Other *(please specify)*:

Click here to enter text.

**Distribution**

Free  Profit Expected retail price: $ Click here to enter text.

Not-for-profit Please elaborate: Click here to enter text.

Click here to enter text.

Professional development Please specify: Click here to enter text.

Click here to enter text.

Limited distribution  Wider Distribution territory: Click here to enter text.

Target audience: Click here to enter text.

How long do you expect to make this material available? Click here to enter text.

Print run/number of downloads: Click here to enter text. Expected publication date: Click here to enter text.

**Signature: Date:**

**APPLICATIONS TO:**

Knowledge Management Officer  
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