

Date __/__/__

Thesis Binding Form

Last Name: _____ First: _____ Initial: __.

University ID Number _____ - _____ - _____ Phone (_____) _____ - _____

Home Address: _____ City/State/Zip _____

Seton Hall Department/Program: _____

Thesis Adviser: _____ Phone (_____) _____ - _____

Thesis Type: Masters ___ Ed.D. ___ Ph.D. ___ Other ___

Total number of copies to be bound: _____

Thesis Title (please print) _____

All fees must be paid at the University Library Administration Office, 2nd Floor.

\$___.00 Binding: \$75.00 for 3 copies (University Archives, Department Archives, Author's copy); \$25 for each additional copy. (all copies provided by candidate) Check payable to Seton Hall University.

\$___.00 Microfilming: \$55.00. Required for Doctoral thesis. Check payable to UMI, Inc.

\$___.00 Copyright: \$65.00 (optional) for registration with the Library of Congress Office of Copyright. Check payable to UMI, Inc.

\$___.00 <<< Total

Pick up at the University Library or Mail: ___ Mail or ___ Pick up at University Library

Mailing Address

Name: _____

Address: _____

City: _____ State: _____

Telephone Number ___ - ___ - ___ E-Mail Address _____



**Permission for Seton Hall University Library to Place a
Digital Copy of Your Thesis or Dissertation in Its
Collection**

I am the author and copyright holder of the below listed thesis or dissertation, which I prepared as part of my course work at Seton Hall University.

I hereby give my permission for Seton Hall University to place a digital copy of my thesis or dissertation in its University Library collection for educational purposes only.

Name of Work (print):

Signature of Author

Date

Printed Name

Seton Hall University Libraries
Office of the Dean
Tel: 973.761.9005 • Fax: 973.761.9432 • Homepage: <http://library.shu.edu>
400 South Orange Avenue • South Orange, New Jersey 07079-2693 • <http://www.shu.edu>