

Texas State Publications Depository Program
Organization & Publications Liaison Update Form, Rev. 5/2017

POLICY STATEMENT: State agencies and institutions of higher education are required by the State Depository Law (*Texas Government Code* §441.101-106) to designate one or more liaisons to the Texas State Publications Depository Program. This person is responsible for reporting the existence of publications and sending them to the Program, providing information about and resolving problems related to them, and negotiating exemptions.

INSTRUCTIONS: Complete this form by supplying the information requested below. **Email this completed form to ref@tsl.texas.gov, or return it to:** Texas State Publications Depository Program, Texas State Library, Room 109, 1201 Brazos, Austin, TX 78701 or P.O. Box 12927, Austin, TX 78711. **If you have questions contact the [Reference Desk](#) at 512-463-5455.**

GENERAL AGENCY INFORMATION	
Name of State Agency, Institution of Higher Education, or Other Organization _____	
Department, Area, or Subdivision (if applicable) _____	
Mailing Address _____ <i>Please include city, state & zip code</i>	
Interagency Address (if applicable) _____ <i>Please include city, state & zip code</i>	
Website Address _____	
Main Telephone Number _____	Email Address _____
<i>Please include area code</i>	
CHIEF EXECUTIVE OFFICER OR DIRECTOR INFORMATION	
Salutation: Ms. Mrs. Miss Mr. Dr.	
First Name _____	Last Name _____
Title _____	Email Address _____

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Texas State Publications Depository Program

Publications Liaison Form

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PRINT PUBLICATIONS LIAISON INFORMATION

Salutation: Ms. Mrs. Miss Mr. Dr.

First Name

Last Name

Department, Area or Subdivision (if applicable)

Title

Email Address

Direct Telephone Number

Department Telephone Number

Interagency Address (if different from above)

Please include city, state & zip code

ELECTRONIC PUBLICATIONS LIAISON INFORMATION

Check this box if the electronic publications liaison is the same as the print liaison

Salutation: Ms. Mrs. Miss Mr. Dr.

First Name

Last Name

Department, Area or Subdivision (if applicable)

Title

Email Address

Direct Telephone Number

Department Telephone Number

Interagency Address (if different from above)

Please include city, state & zip code

Agencies and institutions may copy and use this form to update the Texas State Library regarding changes in location, name, liaison, etc. Return the completed form via mail (address provided on the reverse) or via email to ref@tsl.texas.gov . This form is also available from www.tsl.texas.gov/statepubs/index.html.