# The Wake Review

## Faculty Submission Form

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| Contact Information | |
|  | |
| Name |  |
| Email Address |  |
| Courses Taught |  |
| Write a little biography about yourself. |  |

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| Your Submission | |
| What Category is Your Submission? | Choose an item. |
| Medium or Genre  (ex. Short story, song, screenplay, etc.) |  |
| Title of Work |  |
| Brief Description of Work  (What is it about, what inspired you, etc.) |  |

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| Agreement and Signature | |
| By submitting this form, I certify that this work of art or writing is my original work. I give the *Wake Review* permission to publish this work on the website or any other medium if selected. I acknowledge that the *Wake Review* has the right to reproduce the work for promotion of the magazine or in subsequent printings. I give permission for the *Wake Review* to edit this work for grammar, clarity, and accuracy if selected. I understand that this is only a submission and it does not guarantee selection and publication of my work. | |
|  | |
| Name |  |
| Date |  |