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Oral History Agreement


I, Youssef wahby (name, please print)

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I give my consent for AUC to make my interview recording and transcript available to users, including internet users. I understand that the interview recording and transcript will be stored and made accessible through the library's online digital platforms, and deposited with the AUC Library for public listening, viewing, and reading.

Signed:

Interviewee Signature:  Date: Saturday April 9th

Name (Please Print): youssef wahby

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Email and Telephone: youssefwahby@aucegypt.edu tel:01122077067

Interviewer Signature: moustafa el shazly Date: april 10, sunday 2022

Name (Please Print): moustafa el shazly