Application by an Individual to Use the TIPSTER Information-Retrieval Text Research Collection, Volume 2

The ______________________________, an organization of approximately _______________ people engaging in research and development of natural-language-processing, information-retrieval or document-understanding systems, which is a part of

Corporation/Partnership/Legal Entity

Official mail address

apply(ies) to use the Information designated as the TIPSTER Information-Retrieval Text Research Collection, volume 2 subject to the following understandings, terms, and conditions. These understandings, terms and conditions apply equally to all or to part of the Information.

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1. The Information may only be used for research and development of natural-language-processing, information-retrieval or document-understanding systems.
2. Summaries, analyses and interpretations of the linguistic properties of the Information may be derived and published in a scientific or technical context, solely for the purpose of describing the research and development and related issues. Any such use shall not infringe the rights of any third party including, but not limited to, the authors and publishers of the excerpts.

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1. Access to the Information by an individual person is to be controlled by that person's organization. The organization may only grant access to people working under its control, i.e. its own members, consultants to the organization, or individuals providing service to the organization.
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The organization shall send a signed copy of this agreement by facsimile to LDC, fax number (+1) 215 573-2175. Alternately, the organization shall email an electronic version of the signed agreement to LDC at ldc@ldc.upenn.edu.

By the applicant:
Signature: ______________________________
Date: ______________________________
Name: ______________________________
Title: ______________________________

Accepted for the Organization:
Signature: ______________________________
Date: ______________________________
Name: ______________________________
Title: ______________________________
Organization: ______________________________