NTCIR TEST COLLECTION MEMORANDUM ON PERMISSION TO USE

Instructions

Please make two copies of the form for each task you will obtain in double-sided print.

At the top of the page 1, please enter the DATE, the NAME OF YOUR INSTITUTION (a legal institution or a department or section of a named legal institution), not an individual, and the ADDRESS of registered office.

At the middle of page 1, please enter the research representative applicant's NAME, TITLE, and AFFILIATION.

At the bottom of page 2, please enter the name of your INSTITUTION, the NAME OF THE PERSON SIGNING, his/her TITLE, DIVISION and notice ADDRESS.

Signatures are needed on both agreement forms.

The person signing this memorandum should be the **Primary Investigator** or the **person authorized by the institution for such signatures**.

For the agreement forms of three pages, each page of the agreement should be initialed (the person signing the agreement should put his/her initials on each and all pages).

Please make TWO COPIES of the main section with the appendix in bound form.

Please send the forms by postal mail or courier to the address below: NTCIR Project (Rm.1309) National Institute of Informatics 2-1-2 Hitotsubashi Chiyoda-ku, Tokyo 101-8430, JAPAN

After counter-signed by NII side, one copy of the form will be sent to you and one copy will be kept by the NII.

2013/11/21