



MAPLE

APPLICATION FORM for LEASED SITE LICENSE SOFTWARE

Employees of the University of Manitoba may obtain a right-to-use license for Maple from Information Services and Technology, subject to the terms and conditions of the University of Manitoba license for the software. The software cannot be distributed until this application has been received by Information Services and Technology.

Forms should be sent to: Software License Administrator
123 Fletcher Argue Building
Email: servicedesk@umanitoba.ca
Phone: (204) 474-8600

TYPE OF INSTALLATION: (Please check one)

University Equipment	Number of workstations: _____
Network server	Number of concurrent users: _____
Employee's privately owned equipment	Number of workstations: _____

APPLICANT:

Name: _____

Employee No: _____

Department: _____

Faculty: _____

Email address: _____

- I am currently an employee of the University of Manitoba, and I certify that the information provided in sections A, and B above is correct.
- I will allow the software to be used only by current employees of the University of Manitoba.
- I will not allow the software, documentation, or accompanying written materials to be rented, leased, or resold.
- I will destroy my copy of the software as soon as I am no longer officially associated with the University of Manitoba.

APPLICANTS SIGNATURE: _____

DATE: _____

INSTALLATION FEES: Installation DVD's are not included in the licensing fees. Multiple installations can be done with one copy as long as all installations adhere to the terms specified on page 1 of this form. Software installation is also available from I.S.T.'s Software Distribution site via the network. Please contact the Service Desk or your departmental representative for information.

I.S.T. Software Distribution			<u>\$(no charge)</u>
Windows:	_____	copies x \$20 / copy =	\$ _____
Linux x86:	_____	copies x \$20 / copy =	\$ _____
Macintosh OS X:	_____	copies x \$20 / copy =	\$ _____

PAYMENT METHOD: (please complete 1, 2, or 3)

1. FOAP Number: _____

If your fund starts with '3' and is research funded please identify how the request is related to the research project tied to that Grant number:

Signing authority:

Name: _____ Phone: _____

Signature: _____ Date: _____

2. Cheque payable to "University of Manitoba"

3. Contact Software License Administrator (204) 474-7226 to pay with Credit Card

DISTRIBUTION

Pick up from 123 Fletcher Argue:

Campus Mail to address given above:

TO BE COMPLETED BY INFORMATION SERVICES AND TECHNOLOGY

IDC or Receipt #: _____ Date: _____

I have carefully read the above statement and I understand that by taking possession of Maple products, I agree to abide by the above restrictions and that my failure to do so may result in university disciplinary proceedings being brought against me. Further, I understand that the University of Manitoba has assigned any and all causes of action against me for violation of this agreement to SAS Institute Inc., which may subject me to legal persecution for such violation.

I ATTEST THAT I AM PRESENTLY A BONA FIDE EMPLOYEE OF THE UNIVERSITY OF MANITOBA.

COMPUTER LICENSE:

I apply to use the software from the following computer to which I can control access:

COMPUTER SERIAL NUMBER: _____

SERVICE TAG NUMBER: _____

PHYSICAL LOCATION/ADDRESS: _____

I will notify Information Services and Technology if this equipment is relocated.

AGREED TO:

By _____
(Signature)

Name _____
(Please print)

Date _____