



**MATHEMATICA**

APPLICATION FORM for LEASED SITE LICENSE SOFTWARE

Employees of the University of Manitoba may obtain a right-to-use license for Mathematica 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 Information Services and Technology have received this application.

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

**TYPE OF INSTALLATION:**

University Equipment.

Number of workstations: \_\_\_\_\_

Mathematica can only be run on-campus on a first-come, first-serve basis and requires a connection to the campus network.

**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 members 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			\$(no charge)
Windows (XP/Vista/7) DVD	_____	copies x \$25 =	\$_____
Linux X86 DVD	_____	copies x \$25 =	\$_____
OS X DVD:	_____	copies x \$25 =	\$_____

**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: \_\_\_\_\_