**LensAge Code v1.0 Access Form**

For noncommercial and scientific research purposes

This form applies to an application for a request of LensAge code. Please fill out this form for your intended research in which part of the LensAge code will be used. The completed form can be submitted via email to linht5@mail.sysu.edu.cn together with the requested license. Submitted license and data access forms will be evaluated by LENSAGE TEAM to verify whether the request is subject to any intellectual property, privacy protection, or confidentiality obligations. For requests from verified academic researchers, access will be granted within one month.

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| 1. **Details of the primary applicant** | |
| **Name:** |  |
| **Position / Function:** |  |
| **Institute / Organization:** |  |
| **Lab / Research Team:** |  |
| **Address:** |  |
| **ZIP or Postal code & City:** |  |
| **Country:** |  |
| **Telephone Number:** |  |
| **Email:** |  |

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| 1. **Description of your intended research** | |
| **Research Title:** |  |
| **Research Type:** |  |
| **Research Purpose:** |  |
| **Research Conditions:** *(Please provide a brief description of your research conditions, for example, the previous work relating to this research, laboratory conditions, etc.)* |  |

1. **Motivation for LensAge Code request**

*(Please provide a rationale for all the requested code needed for your research. For example, when you request codes for developing InceptionV3 models of LensAge, please provide an explanation why you need this specific code to answer the research question(s) stated in your research.)*

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| 1. **Required code** *(Please specify which part of code for your research.)* | |
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1. **Other remarks**

*(If you have any other remarks regarding this form, please specify here.)*