OASIS Open Projects: Entity Contributor License Agreement

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Entity Information

OASIS Open Projects: Entity Contributor License Agreement

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* (required) Organization's Full Legal Name:

Defense Forensics and Biometrics Agency

* (required) Mailing Street

251 18th Street

* (required) Mailing City

Arlington

* (required) Mailing State

VA

* (required) Mailing Zip/Postal Code

22202

* (required) Mailing Country

USA

Representative Information

Name of organization's representative (person to be used for communications between OASIS and the organization regarding this Entity CLA).

* (required) First Name

Ryan

* (required) Last Name

Triplett

* (required) Email Address

ryan.l.triplett.civ@army.mil

Project Information

Name of the Open Project to be covered by this Entity CLA. If no project is listed, this ECLA will be assumed to apply to any project in which your designated employees or representatives participate.

* (required) OASIS Open Project Title:

National Information Exchange Model (NIEM) Open Project ▲ ▼

Terms of Agreement

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OASIS also calls your attention to the requests in the Call for Patent Disclosure contained in the Open Project Rules.

You agree to promptly notify OASIS by email to open-projects-cla@oasis-open.org (mailto:open-projects-cla@oasis-open.org) if you become aware of any facts, changes or circumstances that would make your commitments and statements in this Entity CLA inaccurate in any way, or if you wish to withdraw from this CLA.

Processing this CLA

You may submit this CLA request by clicking the "Submit" button below. You should then receive an email message from open-projects-cla@oasis-open.org (mailto:open-projects-cla@oasis-open.org) with the subject line "OASIS Open Projects: CLA Confirmation" confirming that the information you submitted has been received. Questions may be submitted directly to OASIS Open Project Administration Staff at any time: send general questions to open-projects-admin@oasis-open.org (mailto:open-projects-admin@oasis-open.org) and CLA-related questions to open-projects-cla@oasis-open.org (mailto:open-projects-cla@oasis-open.org)

Alternate Submission via this PDF form:
This form must be sign by an authorized representative of the entity named and emailed to open-projects-cla@oasis-open.org. Your submitted form data will be entered into the electronic records and processing as indicated above.
Approving Signature for submitting organization

_____
Name:

_____
Date:
___08/29/2023_____