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National Institute for Early Education Research

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RUTGERS, THE STATE UNIVERSITY OF NEW JERSEY:

BY: _____ DATE: _____
Signature of Authorized Signatory of NIEER MM/DD/YYYY

Print Name:

Title:

Address: 73 Easton Avenue, New Brunswick, NJ 08901

Telephone No.: 848-932-4350

E-mail:

LICENSEE:

BY: _____ DATE: _____
Signature of Authorized Signatory of ORGANIZATION MM/DD/YYYY

Print Name:

Title:

Address:

Telephone No.:

Email:

License agreement shall be in effect until: _____

Signature of Authorized Signatory of ORGANIZATION

DATE: _____

MM/DD/YYYY

Licensee agrees to share CASEBA data by the following date: _____

Signature of Authorized Signatory of ORGANIZATION

DATE: _____

MM/DD/YYYY