

Description form - PROVIDER

Language Resources: Multi-modal

M.1. GENERAL INFORMATION

Data included:

Audio (*see section M.6.*)
 Image (*see section M.7.*)
 Video (*see section M.8.*)

Language(s):

Language dependent
 Language independent

Language(s):

M.2. RECORDING INFORMATION – HUMANS

Sex and number of humans:

Male Number:

Female Number:

Imposters Number:

Synthetic Number:

Total number:

Number of humans visible in the same frame:

Age class: (please indicate number of speakers and age)

Children I (__ to __)
 Adults I (__ to __)
 Elderly (over 60)

Children II (__ to __)
 Adults II (__ to __)
 Age unknown

Teenagers I (__ to __)
 Adults III (__ to __)
 Other distribution:

Teenagers II (__ to __)
 Adults IV (__ to __)

Origin:

Native
 Non native
 Unknown

Comments:

Geographic distribution:

Total number of regions:

Percentage per region:

Regions included:

Information included about:

Place of childhood
 Place of birth
 Dialect/accent

Comments:

Additional speaker information included:

Speaking/hearing impairments
 Trained speakers
 Education level

Smoking habits
 Profession
 Other:

Comments:

M.3. RECORDING INFORMATION – RESOURCE**Human body parts visible in the resource:**

- | | | |
|---------------------------------|-------------------------------------|-------------------------------|
| <input type="checkbox"/> None | <input type="checkbox"/> Whole body | <input type="checkbox"/> Head |
| <input type="checkbox"/> Face | <input type="checkbox"/> Mouth | <input type="checkbox"/> Arms |
| <input type="checkbox"/> Hands | <input type="checkbox"/> Legs | <input type="checkbox"/> Feet |
| <input type="checkbox"/> Other: | | |

Distractors visible in the resource:

- | | | |
|-------------------------------------|----------------------------------|--|
| <input type="checkbox"/> None | <input type="checkbox"/> Hat | <input type="checkbox"/> Glasses |
| <input type="checkbox"/> Watch | <input type="checkbox"/> Scarf | <input type="checkbox"/> Pen/Paper/Notepad |
| <input type="checkbox"/> Microphone | <input type="checkbox"/> Markers | <input type="checkbox"/> Mobile phone |
| <input type="checkbox"/> Other: | | |

Interactive media visible/audible in the resource:

- | | | |
|---|---|---------------------------------------|
| <input type="checkbox"/> None | <input type="checkbox"/> Graphical screen | <input type="checkbox"/> Computer pen |
| <input type="checkbox"/> Tactile screen | <input type="checkbox"/> Data glove | <input type="checkbox"/> PDA |
| <input type="checkbox"/> Desktop PC | <input type="checkbox"/> Laptop | <input type="checkbox"/> Mouse |
| <input type="checkbox"/> Other: | | |

Annotated modalities in the resource: (for details see section M.4.)

- | | | |
|---|---|---|
| <input type="checkbox"/> None | <input type="checkbox"/> Speech | <input type="checkbox"/> Hand/Arm gestures |
| <input type="checkbox"/> Gaze/Eye movements | <input type="checkbox"/> Facial expressions | <input type="checkbox"/> Lip movements |
| <input type="checkbox"/> Head movements | <input type="checkbox"/> Body movements | <input type="checkbox"/> Hand manipulation of objects |
| <input type="checkbox"/> Other: | | |

Total number of annotated modalities:

Comments:

Other modalities available/visible but not annotated in the resource: (for details see section M.4.)

- | | | |
|---|---|---|
| <input type="checkbox"/> None | <input type="checkbox"/> Speech | <input type="checkbox"/> Hand/Arm gestures |
| <input type="checkbox"/> Gaze/Eye movements | <input type="checkbox"/> Facial expressions | <input type="checkbox"/> Lip movements |
| <input type="checkbox"/> Head movements | <input type="checkbox"/> Body movements | <input type="checkbox"/> Hand manipulation of objects |
| <input type="checkbox"/> Other: | | |

Total number of modalities (not annotated):

Comments:

Scene – Illumination:

- | | | |
|-----------------------------------|--|---|
| <input type="checkbox"/> Daylight | <input type="checkbox"/> Single source | <input type="checkbox"/> Multiple sources |
| <input type="checkbox"/> Fix | <input type="checkbox"/> Variable | <input type="checkbox"/> Other: |

Scene – Backgrounds:

- | | | |
|--------------------------------|----------------------------------|---------------------------------|
| <input type="checkbox"/> Plain | <input type="checkbox"/> Complex | <input type="checkbox"/> Other: |
|--------------------------------|----------------------------------|---------------------------------|

General info:

Total number of sessions:

Number of poses per subject:

M.4. MODALITIES – DETAILED INFORMATION

Facial expressions: (6 universal expressions of emotion)

| | | |
|------------------------------------|----------------------------------|-----------------------------------|
| <input type="checkbox"/> Anger | <input type="checkbox"/> Disgust | <input type="checkbox"/> Fear |
| <input type="checkbox"/> Happiness | <input type="checkbox"/> Sadness | <input type="checkbox"/> Surprise |
| <input type="checkbox"/> Other: | | |

Head movements:

| | | |
|-----------------------------------|---|---|
| <input type="checkbox"/> Rotation | <input type="checkbox"/> Inclination forward/backward | <input type="checkbox"/> Inclination sideward |
| <input type="checkbox"/> Other: | | |

Face views:

| | | |
|----------------------------------|----------------------------------|---------------------------------|
| <input type="checkbox"/> Frontal | <input type="checkbox"/> Profile | <input type="checkbox"/> Other: |
|----------------------------------|----------------------------------|---------------------------------|

Total number of face views per subject:

Gestures:

| | | |
|---|--|------------------------------------|
| <input type="checkbox"/> Interactional | <input type="checkbox"/> Non-interactional | <input type="checkbox"/> Emotional |
| <input type="checkbox"/> Non identified | | |
| <input type="checkbox"/> Other: | | |

Gaze/Eye movements:

| | | |
|-------------------------------------|---|--------------------------------------|
| <input type="checkbox"/> Saccades | <input type="checkbox"/> Pursuit motion | <input type="checkbox"/> Convergence |
| <input type="checkbox"/> Horizontal | <input type="checkbox"/> Vertical | <input type="checkbox"/> Other: |

Hand manipulation of objects:

| | | |
|--|---|--|
| <input type="checkbox"/> Direct manipulation | <input type="checkbox"/> Indirect manipulation | <input type="checkbox"/> Modifying objects |
| <input type="checkbox"/> Joining/splitting objects | <input type="checkbox"/> Changing object position | <input type="checkbox"/> Other: |

Body movements:

| | | |
|-------------------------------------|-------------------------------------|-------------------------------------|
| <input type="checkbox"/> Upper body | <input type="checkbox"/> Lower body | <input type="checkbox"/> Whole body |
| <input type="checkbox"/> Arms | <input type="checkbox"/> Legs | <input type="checkbox"/> Other: |

M.5. APPLICATION INFORMATION

Authentication:

| | | |
|--|--|--|
| <input type="checkbox"/> Face verification | <input type="checkbox"/> Speech verification | <input type="checkbox"/> User authentication |
| <input type="checkbox"/> Other: | | |

Recognition:

| | | |
|---|---|---|
| <input type="checkbox"/> Face recognition | <input type="checkbox"/> Automatic speech recognition | <input type="checkbox"/> Automatic person recognition |
| <input type="checkbox"/> Expression recognition | | |
| <input type="checkbox"/> Other: | | |

Analysis:

| | | |
|---------------------------------------|--|---------------------------------|
| <input type="checkbox"/> Lip tracking | <input type="checkbox"/> Speech/lips correlation | <input type="checkbox"/> Other: |
|---------------------------------------|--|---------------------------------|

Synthesis:

| | | |
|---|----------------------------------|--|
| <input type="checkbox"/> Talking heads | <input type="checkbox"/> Avatars | <input type="checkbox"/> Humanoid agents |
| <input type="checkbox"/> Multimedia development | | |
| <input type="checkbox"/> Other: | | |

Control:

| | | |
|--|--|---------------------------------|
| <input type="checkbox"/> Voice control | <input type="checkbox"/> Speech assisted video | <input type="checkbox"/> Other: |
|--|--|---------------------------------|

Miscellaneous:

| | | |
|--|---------------------------------|--|
| <input type="checkbox"/> Information retrieval | <input type="checkbox"/> Other: | |
|--|---------------------------------|--|

Application areas:

| | | |
|---|-----------------------------------|--|
| <input type="checkbox"/> Education/Training | <input type="checkbox"/> Research | <input type="checkbox"/> Entertainment |
| <input type="checkbox"/> Banking | <input type="checkbox"/> Tourism | <input type="checkbox"/> Other: |

M.6. TECHNICAL INFORMATION – AUDIO

Signal encoding:

- A-law μ -law Linear PCM
 Other:

File format:

- AIFF Wav Raw data
 SAM NIST/Sphere Au
 Other:

Sampling rate:

- 8 kHz 16 kHz 32 kHz
 44,1 kHz 48 kHz Other:

Quantisation:

- 8 bit 16 bit 32 bit
 Other:

Byte order:

- Lo-hi (Intel) Hi-lo (Motorola)

Data format:

- Signed integer Unsigned integer Other:

Amount of data:

Size (Mb, Gb, etc) or duration (minutes, hours, etc):

Compression:

- None Shorten Other:

Number of recording channels:

- 1 (mono) 2 (stereo) 3
 4 8 Other:

Annotation standard:

- SAM SGML XML
 NIST/LDC Other:

Sound quality measures included:

- SNR Cross talk Clipping rate
 Background noise Other:

Tools used for measuring sound quality:

Speech content:

No. of items:

No. of items:

- | | | | |
|--|-------|--|-------|
| <input type="checkbox"/> Application words | _____ | <input type="checkbox"/> Digit-set | _____ |
| <input type="checkbox"/> Concatenated words | _____ | <input type="checkbox"/> Isolated digits | _____ |
| <input type="checkbox"/> Isolated words | _____ | <input type="checkbox"/> Natural numbers | _____ |
| <input type="checkbox"/> Syllables | _____ | <input type="checkbox"/> Money amounts | _____ |
| <input type="checkbox"/> VCV sequences | _____ | <input type="checkbox"/> Credit card numbers | _____ |
| <input type="checkbox"/> Continuous sentences | _____ | <input type="checkbox"/> Telephone numbers | _____ |
| <input type="checkbox"/> Phonetically rich sentences | _____ | <input type="checkbox"/> Yes/no questions | _____ |
| <input type="checkbox"/> Phonetically balanced sentences | _____ | <input type="checkbox"/> Other: | _____ |

M.7. TECHNICAL INFORMATION – IMAGE

Resolution in pixels:

Color components:
 RGB CMYK 4:2:2
 Other:

Color depth:
 8 bits 16 bits 24 bits
 32 bits Other:

File format:
 JPG GIF TIFF
 BMP EPS CIF
 PPM Other:

Amount of data:
Size (Mb, Gb, etc):
Duration (minutes, hours, etc):

Compression:
 None Zip Other:
Compression ratio:

M.8. TECHNICAL INFORMATION – VIDEO

Synchronized audio (*see section M.6.*)

Resolution in pixels:

Color components:
 RGB CMYK 4:2:2
 Other:

Color depth:
 8 bits 16 bits 24 bits
 Other:

Frame rate:
 <25 frames/sec. 25 frames/sec. 30 frames/sec.
 50 frames/sec. 60 frames/sec. Other:

File format:
 MOV AVI MPEG
 Quicktime SGI Other:

Amount of data:
Size (Mb, Gb, etc):
Duration (minutes, hours, etc):

Compression:
 None Zip Other:
Compression ratio:

M.9. TECHNICAL INFORMATION – MODELING

Models:
 2D 3D Other:

File formats:
 VRML Other:

Algorithms used:

M.10. FURTHER COMMENTS

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