MAULANA AZAD NATIONAL INSTITUTE OF TECHNOLOGY, BHOPAL 462003 (M.P.) INDIA

Application Form for User Account on HPC Facility

Particulars of Applicants: (Fill the details in CAPITAL LETTERS)

Full Name: ……...

Scholar ID/Emp ID: ……

Department: ……...

Designation: **(Faculty /Student) [✔]**

Contact No:.....…… MANIT Email Id:…… (Use Personal if Institute Email is not available)

Application(s) to be run: ……..

Number of CPU hours per month: ……

Total Storage (Home) required (50 GB Default): ……...

The Maximum memory requirement for your job:……

Justification of Resources: ……..

……..

Declaration by Applicant:

I hereby declare that I shall confirm the usage policies of the HPC facility and acknowledge that failure to adhere to these policies shall result in the termination of my account.

Name of Applicant:

Signature of Applicant:

Date:

Declaration by Faculty or HOD:

I recognize the applicant as a member of my group and recommend his/her application for a user account.

Name of HOD/Faculty/Guide:

Signature of HOD/Faculty/Guide:

Date :

---------- [OFFICE USE ONLY] ----------

ID Created By:

Name :

Signature :

Date :