



# 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: .....

Emp/Scholar ID: .....

Department: .....

Designation: ( **Faculty**                                 /Student                                 )

Contact Number: ..... Email Id: .....

Period of Validity: .....

Application(s) to be run: .....

Number of CPU hours per month: .....

Total Storage (Home) required (100 GB Default): .....

The Maximum memory requirement for a 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:

Signature:

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 :

Signature :

Date :

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

### ID Created By:

Name :

Signature :

Date :