Computational Science Division SAHA INSTITUTE OF NUCLEAR PHYSICS

Computation Account

[For Computation / Individual]

Full Name of the Applicant (in block letters)

DISK SPACE ALLOTTED

Signature

Designation	:			
Division/Section	:			
Telephone No. (Internal)	:			
Email address of applicant	:			
Mobile no. of applicant	:			
LOGIN Name (up to 7 characters)	:			
	Signature of the applicant with date □□□ Authorised by:			
□□□ Do not require for faculty members	Signature of Head of the Division / Section or Advisor with date			
Applicants may kindly note the following				
 ✓ The System may have to be brought down at short notice because of system maintenance or other reasons. ✓ While care would be exercised with regard to safekeeping of user files in the main systems, the users are strongly advised to keep backup copies of their important files. ✓ The duplicate applicant's copy of this form should be preserved for future reference. 				
[For office use only]				
SERVER NAME	LOGIN NAME			

.....

DATE OF OPENING A/C

.....

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2254, 5542, 5544, 5546, 2252

[For office use only]					
SERVER NAME		DISK SPACE ALLOTTED			
LOGIN NAME		TEMP.PASSWORD (Must be changed by the user)			
Signature		Date			