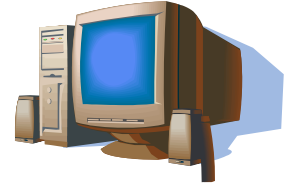# GFDL Computer Account Request

Welcome to NOAA's Geophysical Fluid Dynamics Laboratory.

To obtain an account on GFDL's computer systems, you will need a GFDL government sponsor/contact. In addition, you must read, and agree to comply with all aspects of the GFDL Computer Use Policy (*http://www.gfdl.noaa.gov/internal*).

Note that your account is for your exclusive use - you must not allow others to use your account.

Next, complete Part I of this form and put your name at the top of the subsequent pages, then submit it, with a justification, to your supervisor/sponsor/contact. Non-US-citizens must also complete Part II. If you are also requesting access to GFDL buildings, you will need to supply a photo (or we can take one) for identification purposes, and you must read, and agree to abide by, the GFDL Building Access Policy (*http://www.gfdl.noaa.gov/internal*). Note that all accounts are subject to semi-annual justification by your sponsor and approval by the authorizing project leader and GFDL Management. You may also be asked to submit an updated form or updated info periodically.

PART I: User Information

User Name _____ _____ _____
(First)   (Middle Initial)   (Last)

Are you a United States Citizen? ☐ Yes ☐ No   **(If "No", please complete Part II of this form)**

Home Information

Address: _____ _____ ____ _____ _____
(Street)   (City)   (State) (Country)   (Zip)

Phone # __ __ __ - __ __ __ - __ __ __ __   **E-Mail:** _____

Check if you do not want this info shown in the internal GFDL directory: ☐ Address ☐ Phone ☐ Email ☐ Photo
Would you like your photo posted on GFDL's external web pages? ☐ Yes ☐ No

Business Information

GFDL Office No. _____   **AOS / Sayre Hall Office No.** _____

Other than GFDL or Sayre Hall:

_____
(Company/Institution)

_____ _____ ____ _____ _____
(Street)   (City)   (State) (Country)   (Zip)

Phone # __ __ __ - __ __ __ - __ __ __ __   **Fax #:** __ __ __ - __ __ __ - __ __ __ __

E-Mail: _____

Do you want your GFDL e-mail forwarded to the above address? (For external users only) ☐ Yes ☐ No

Affiliation

Please circle one of the following:

GFDL Employee   GFDL Collaborator   GFDL Student Intern   GFDL Contractor

AOS Employee   AOS Visiting Scientist or Post-Doc   AOS Graduate Student   AOS Collaborator

UCAR Employee   UCAR Visiting Scientist or Post-Doc

Other (explain): _____

How long do you expect to need access?   _____

Which systems?   Main network & HPCS? ☐ Yes ☐ No   Grid Cluster? ☐ Yes ☐ No   Admin Network? ☐ Yes ☐ No
                 Scientific Windows? ☐ Yes ☐ No   Wireless Network? ☐ Yes

Are you requesting access to the GFDL buildings?   ☐ Yes ☐ No   (If Yes, see GFDL Building Access Policy.)

Are you requesting access to the Computer Room?   ☐ Yes ☐ No   (For Vendor or Maintenance Personnel.)

I have read, and agree to comply with, the GFDL's Computer Use Policy (and Building Access Policy).

_____ _____
(Signature)   *(Date)*

For Official Use Only   *Form revision 5.0 June 27, 2006*

User Name _____   _____   _____
                          (First)   (MI)   (Last)

PART II: Foreign National Information

Country Information

Country of Birth: _____

Date of Birth: _____ / _____ / _____
                        Month   *Day*   *Year*

Current Citizenship: _____   **Passport Number:** _____

Country of "Permanent Residence": _____   **Visa Number:** _____

Green Card Number: _____

PART III: Sponsorship and Justification (to be completed by GFDL Sponsor)

Requested Dates of Account Access: From _____ / ____ / _____ To _____ / ____ / _____
                                                Month *Day* *Year*   *Month* *Day* *Year*

Is access to GFDL buildings required? ☐ Yes From _____ / ____ / _____ To _____ / ____ / _____
                                                        Month *Day* *Year*   *Month* *Day* *Year*

Brief Justification for Account on GFDL Computer Systems (and Access to GFDL Buildings):

_____

_____

_____

_____

Government Host/Sponsor

_____   _____
           Printed Name   *Position / Title*

_____   _____
            Signature   *Date*

   * Please Forward To GFDL Project Leader

Sponsor's Bureau (Organization)   Department of Commerce
And Address: National Oceanic and Atmospheric Administration
                                      Office of Oceanic and Atmospheric Research
                                      Geophysical Fluid Dynamics Laboratory
Tel: (609) 452-6500   Princeton University, Forrestal Campus
Fax: (609) 987-5063   P.O. Box 308
                                      201 Forrestal Road
                                      Princeton, NJ 08542

User Name _____ _____ _____
(First)   (MI)   (Last)

PART IV: Approvals

GFDL Project Leader _____ _____
(See list below)   *(Signature)*   *(Date)*

Please Forward To:
GFDL Director's Office _____ _____
(Signature)   *(Date)*

Please Forward To:
GFDL Personnel Office _____ _____
(Signature)   *(Date)*

*** Return the completed form with all required signatures to the GFDL Operations Manager, Room 163.

Account Code	Project Name	Authorized Project Leader
A	Administrative Services	Stephen Mayle
B	Biospheric Processes	Hiram Levy III
F	Modeling Services	Brian Gross
G	Climate Dynamics	Thomas Delworth
I	Climate Diagnostics	Gabriel Lau
M	Atmospheric Physics & Chemistry	V. Ramaswamy
O	Oceans & Climate	Bob Hallberg
S	Systems Engineering & Architecture Services	Ron Bewtra
T	Technical Services	John Sheldon
U	Computer Operations	Bill Shearn
W	Weather & Atmospheric Dynamics	Isaac Held
Y	Vendor	Ron Bewtra

For Operations Use Only:

User ID   - _____   **Date Registered** - _____

User Index - _____   **Output Bin No.** - _____

File Systems

/home0   /home1   /home2   /home3   /home4
/home5   /home6   /home7   /home8   /home9

/arch1   /arch2   /arch3   /arch4

Project/Account   **Letter Code:** _____   **ASCII Code:** _____

Temporary Badge # _____

Completed ITSAC _____   **Date** _____
Confirmed By (GFDL ITSSO)

User Name _____ _____ _____
(First)   (MI)   (Last)

For Official Use Only

PART V: System Administrator Account Request

Is access to the Computer Room required?   ☐ **Yes**   ☐ **No**

Is system administrator level access required?   ☐ **Yes**   ☐ **No**

For what systems are you requesting administrator access?

☐   **Linux Workstations**   ☐   **Administrative Network**
☐   **HPCS**   ☐   **Scientific Windows**
☐   **Atipa (Grid) Cluster**   ☐   **Scientific Mac**
☐   **Other** _____

☐   **Servers (Please List)**

_____   _____

_____   _____

System Administrator Account Request Approval

System Owner   _____ _____
                                                    Signature   *Date*

Systems Group Manager _____ _____
                                        Signature   *Date*

PART VI: Background Check Process (Personnel Office Use Only)

Type of Background Check Required   ☐   **Name Check**   ☐   **SAC**   ☐   **NACI**

                          ☐   **BI**   ☐   **Other**_____

Date Submitted _____ / _____ / _____
                      Month   *Day*   *Year*

Form(s) Submitted _____

NOAA Badge No. _____
                      (if applicable)