Registration Form for using CABLE offline

Name of applicant:	Dr.	Bala	Narapusetty
	(Title)	(First name)	(Last name)
Affiliation: GSFC-NAS	SA/SAIC		
Address: NASA-GSFC,	8800 Greenbelt	Road, Code 617, Greenb	elt, MD-20771
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Telephone number:			
(Please note that your users page.)	name, affiliat	ion and phone number	er will be posted in the list of
If you are a student, p approval, although the			our supervisor (with his users page).
Name of supervisor:	(Tr: (1)	(F: 4)	(T
	, ,	,	(Last name)
Affiliation:			
Address:			
 Email:			
Telephone number:			
*******	******	********	*****
From where or whom	did you hear a	about the CABLE mo	odel? Dr. Jatin Kala
Please provide a short inform us when your		2	of CABLE offline. And please ablished.
(1) Evaluate CABLE in the			nafrost/active-layer regions during
	spring (melti	ilig) seasoii.	
(2) Improve the numerics in	n CABLE to bette dominated re		ures and moistures in avection-
(3) Climate simulations wit	h CABLE on extr	eme permafrost melting I	PCC scenarios

Please read the <u>Licence Agreement</u> (which does not require your signature) before sending the filled registration form via email to <u>Bernard Pak</u>.