

Registration Form for using CABLE offline

Name of applicant:

Mr Jatin Kala

(Title)

(First name)

(Last name)

Affiliation:

Murdoch University

Address:

South Street, Murdoch, 6150, WA

Email:

J.Kala@murdoch-edu.au

Telephone number:

0421244087

(Please note that your name, affiliation and phone number will be posted in the list of users page.)

If you are a student, please provide information about your supervisor (with his approval, although these would not appear in the list of users page).

Name of supervisor:

Prof Tom Lyons

(Title)

(First name)

(Last name)

Affiliation:

Murdoch University

Address:

South Street, Murdoch, 6150, WA

Email:

~~J.Kala@murdoch-edu.au~~ T.Lyons@murdoch-edu.au

Telephone number:

(08) 9360 2413

From where or whom did you hear about the CABLE model? Journal papers.

Please provide a short description of your intended use of CABLE offline. And please inform us when your work involving CABLE is being published.

To investigate land-atmosphere interactions in

Southwest WA.

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