

Registration Form for using CABLE offline

Name of applicant: Dr. Hongang Yang
(Title) (First name) (Last name)

Affiliation: CCRC, UNSW

Address: Level 4, Matthews Bld., University of New South Wales
Sydney, NSW 2052

Email: Hongang. Yang @ unsw. edu. au

Telephone number: 02-9385 9508

(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: _____
(Title) (First name) (Last name)

Affiliation: _____

Address: _____

Email: _____

Telephone number: _____

From where or whom did you hear about the CABLE model? other members in
the CCRC center.

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 learn programming skills from a state-of-the-art code.
to study water cycle and land surface.

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