UCosmic Consortium Membership Enrollment Application for Institutions

If you represent a foundation, association, government agency, private company, etc, please use our membership enrollment application for non-institutions.

Joining the UCosmic® Consortium is a three-step process. First, read the Consortium Membership Agreement and determine whether your organization can agree to its terms. Second, complete the Enrollment Application below. Third, once the Enrollment Application is received, an invoice will be generated.

When the invoice is paid, and the signed Consortium Membership Agreement has been received, your UCosmic membership will be active.

Please complete your Enrollment Application by filling out the form below. You can save your changes at any time directly in this PDF. When you are ready to submit it, click the Submit Application by Email button at the bottom of the form. This will generate an email with your PDF attached. Simply send that email to complete your enrollment application.

Your Institution

Institution Name	
Address (Line 1)	
Address (Line 2)	
City	
State or Province	
Country	
Zip or Postal Code	
Phone	
Fax	

If you are outside the US, please include your country's dialing code in all phone number boxes.

International administrators

Please list the administrators who will be the primary liaisons to the consortium and users of the system. Must list at least one person.

Given Name		Surname	
Email		Phone	

If you are outside the US, please include your country's dialing code in all phone number boxes.

Given Name		Surname	
Email		Phone	

Given Name		Surname	
Email		Phone	

Billing Contact

Please indicate the person who will receive invoices for payment of UCosmic membership fee(s).

Given Name		Surname	

Email		Phone	

If you are outside the US, please include your country's dialing code in all phone number boxes.

Information technology contact(s)

Please list the key IT liaison and personnel who will be directly involved in UCosmic integration. You don't need to add any IT contacts right now, but we recommend you add at least one.

Given Name

Email   Phone

If you are outside the US, please include your country's dialing code in all phone number boxes.

Given Name

Email   Phone

Given Name

Email   Phone

Membership Subscription

Is this application for a single institution or a university system?

○ Single Institution   ○ University System

If this application is for a single institution, what is your annual student enrollment?

○ Under 10,000 Students   ○ 10,000 Students or more

If this application is for a university system, how many institutions are involved?

○ 2-5 Institutions   ○ 6-10 Institutions   ○ 11 or more Institutions

If you are not in the US or Canada, what is the 2007 / 2008 Human Development Index (HDI) for your country?

○ High HDI   ○ Medium HDI   ○ Low HDI

Please see this page if you are not sure of the HDI for your country:
http://hdr.undp.org/en/media/HDR_20072008_EN_Indicator_tables.pdf

The membership term for this application is one year.

When you are finished completing this form, click the button below. An email will be generated with the appropriate subject, recipients, and a PDF attachment of your completed form. Send that email to complete the application process. If you have any questions, please direct your inquiries to the appropriate person:
Membership Questions: **Mitch.Leventhal@suny.edu**   **Billing Questions**: **Kathleen.Bardolf@suny.edu**
Technical Questions: **Dan.Ludwig@ucosmic.org**   **Feature Questions: Rebecca.Smolar@ucosmic.org**