

Rensselaer Polytechnic Institute

CCI User Information Form

Office use only

U:

P:

User Information

Name: _____

Organization: _____

Address: _____

Email: _____

Telephone: _____

Affiliation with CCI:

☐ **Member** – I am an employee (or student) of a CCI-member organization (company, university, or other CCI-member entity) who will be working on member projects.

☐ **Non-member participant** – I am an employee (or student) of an organization authorized by the CCI Governing Board to work with a _____ Member organization CCI-member on member projects.

☐ **NYS User** – I am an employee (or student) of an organization authorized by New York State to use the CCI facility.

☐ **Other:** _____

I have read and understand the CCI Acceptable Use Policy. The above information, including the indicated affiliation with the CCI is complete and correct.

Signature

Manning Ma

Date

Authorization

Signature

Date

Name