

S. N. Bose National Centre for Basic Sciences
Block, - JD, SECTOR – III, SALT LAKE, KOLKATA – 700098

COMPUTER FACILITY UTILIZATION FORM FOR VISITORS, ASSOCIATE & SUMMER STUDENTS

Name:

Designation:

Organization:

E-mail:

Name of the Supervisor/Host Faculty:

Contact No:

Purpose:

Computer Facility to Be Used:

Facility	Specification	Time Slot	Disk Space	Yes/No
Parallel/Serial Cluster				
Linux/Windows System				
Specific Software				
Wireless Access				

Signature of Supervisor/Host Faculty

Signature of User

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Remarks (For In-Charge, Computer Centre Services Cell, if any):