

National Institute of Technology, Kurukshetra

(APPLICATION FORM FOR ACCESS HIGH PERFORMANCE COMPUTER)

Faculty <input type="checkbox"/>	Student <input type="checkbox"/>
Name	
Email Id	
Mobile Number	
Department	
Year & Semester	
Course (B.Tech/M.Tech/P.hD/MCA/MBA)	
Roll No./Reg. No.	
Validity of Institute I-Card (Attach photocopy of I-Card)	
Research Area	
Expected Execution Time for Simulation/Experiment	

I do here by declare that the information furnished in this application is true to the best of my knowledge and belief.

Date:

(Signature of the Applicant)

Place: NIT Kurukshetra

Forward by:

HOD of Concerned Department with Seal

Supervisor/Guide/Project Mentor
(Only for Student)

Prof. I/C (CCN)
