REGISTRATION OF A COMPUTER IN THE SISSA NETWORK WITH FIXED IP ADDRESS

By filling up this form you are asking permission to register a computer in the SISSA network with a fixed IP address. The registration is necessary for every computer for which the administrator password is entrusted to personnel not affiliated to SIS. For those computers using a dynamic IP it is sufficient to register it by using the SISSA DHCP server (as for a laptop, see http://sis.sissa.it/services/network/internal/portauth/info).

The person who signs this form will be considered RESPONSIBLE of the registered computer in agreement with the current Italian legislation, and, in particular, in terms of D.L.196/2003 "Codice in materia di protezione dei dati personali" (law on the protection of personal data).

The signatory below must comply with the conditions of use of the SISSA network, foreseen in the document "SISSA network computing policy" (http://sis.sissa.it/sissanetcomppolicy), and with the rules established by the Italian Research Network "GARR Acceptable Use Policy (AUP)" (http://www.garr.it/b/eng/garr-en/aup-eng-home). The SISSA Sistema Informatico reserves the right of immediately disconnect the system from the SISSA network, without notice, in case of security problems, or of any kind of abuses traceable to the system in question, at least until the problem will be solved.

SYSTEM DATA:

DNS Name: ________________________________.sissa.it
MAC Address: ________________________________
IP Address: ________________________________
OPERATING SYSTEM/S: □ Windows □ Linux □ Other: ____________
SYSTEM TYPE: □ PC/Workstation □ Server
LOCATION: Building: ___ Room: ___ Phone: _________

SURNAME: _____________________________ NAME: _______________________________
E-mail: ___________________________________________________________________
AFFERENT TO:
□ Astrophysics □ Cognitive Neuroscience □ Condensed matter
□ Functional Analysis □ High Energy □ ILAS
□ Mathematical Physics □ Neurobiology □ Statistical and Biological Physics

REASONS: __________________________________________________________________________________

DATE: Trieste, ____________________ SIGNATURE: ________________________________

Sector Head Signature: ____________________________ SIS Head signature: ____________________________