



Department of Mechanical Engineering
INDIAN INSTITUTE OF TECHNOLOGY MADRAS
ME Cluster New-User Access Request Form

Applicant's Name:

Category: Faculty / Staff / B.Tech./ Dual / M.Tech. / M.S. / M.Sc. /Ph.D / Others

Roll No / Employee User Id:

Contact Number:

Name of the Guide:

Duration of access requested:

Start date:

End date (graduation date):

1) Broad area of research for which the ME cluster facility will be used

2) Specific problems addressed (one or two lines)

3) Software that will be used on the cluster

Signature of the scholar with date:

Signature of the guide with stamp:

Signature of ME cluster faculty in charge: