



**Shoshi Fox, Faculty Coordinator**

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**שושי פוקס, מתאמת ענייני סגל**

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### CS ACCOUNT APPLICATION

**1. Full English name:**

Last name

First Name

ID no./ passport no.

**2. Full Hebrew name:**

Last name

First Name

**3. Preferable system name if no other Technion account (T2, TX):**

**4. Expire date of account:**

**5. Technion department affiliation:** Computer Science ☐ other: \_\_\_\_\_

**6. Position at department:**

Graduate student

☐

Guest

☐

Employee

☐

Research assistant

☐

Post Doc.

☐

Other ☐ Specify: \_\_\_\_\_

**7. Personal information:**

Taub office:

Office ext.:

Cell :

Email:

**User declaration:**

I declare hereby pledge to use the computer resources allocated to me by the Technion in agreement with the following terms:

1. To use the computer resources according to the computer law, protection of privacy law and according to the Technion procedures, as distinguished in the Technion web page: [www.technion.ac.il](http://www.technion.ac.il) and according to the CS Department as distinguished in the CS web page: [www.cs.technion.ac.il](http://www.cs.technion.ac.il).
2. To use the computer and information only for my duty as authorized by the Technion or study program.
3. To abide by commitment to discretion concerning any classified information I encounter while using the Technion computers, including personal information as defined in the protection of privacy act.
4. I am aware that any Technion computer account is personal and login password is secret and non transferable.
5. I will personally bear the responsibility for any use which will be committed in my computer account.
6. I am committed to avoid use in any computer account which I am not authorized to.

Date

User name

Signature

**Users who are not Technion Faculty:** Please have your direct person in charge will fill in the details in this part:

1. I the undersigned require to permit Mr./Ms. \_\_\_\_\_ to open a computer account at CS.
2. I the undersigned am responsible to the use which will be committed in the computer account by the user.  
Within my jurisdiction I will prevent illegal and nonprocedural use.

Date

Name of person in charge

Signature

Login name

**Singature of secretary in charge:**

(Faculty, guest and post doc. – Shoshi Fox; Employee – Shirley Kruvi; Research Assistant – Anina Shoham)

I the undersigned secretary in charge require to permit Mr./Ms. \_\_\_\_\_ to open a computer account at CS.

Date

Name of person in charge

Signature

Login name

Email to [hishama@cs.technion.ac.il](mailto:hishama@cs.technion.ac.il)