



MEMBERSHIP APPLICATION

Date _____

Name _____

Rank/Title _____

Primary Dept. _____

Mailing Address _____

Business Phone _____ Email _____

1. RESEARCH INTERESTS

- a. What are your major interests in computational research and/or education?

(Please use additional pages if necessary.) _____

- b. Primary field of research: _____

2. RESEARCH PROGRAM ALIGNMENT

In which Program(s) do you plan to be aligned? (You may check more than one.)

PROGRAM

- Climate & Environmental Hazards
 Computational Biology & Bioinformatics
 Drug Discovery
 Big Data Analytics & Data Mining
 Social Systems Informatics
 Visualization
 Smart Cities

PROGRAM DIRECTOR

Benjamin Kirtman, PhD
Vance Lemmon, PhD
Stephan Schürer, PhD
Mitsunori Ogihara, PhD
Daniel S. Messinger, PhD
Alberto Cairo
Rodolphe el-Khoury, PhD

3. SHARED RESOURCES

RESOURCE

- Advanced Computing
 Software Engineering

RESOURCE DIRECTOR

Joel Zysman
Christopher Mader

Please attach your current CV (NIH or NSF biosketch will suffice), and submit your application via email along with your photo (min. 240x240 at 72 dpi) to: ccsmembership@med.miami.edu.

Upon review of your application, you will receive a letter with information on your membership. Your profile will appear on our website with your photo and link to your primary work website and publications list. Thank you for your cooperation.