UNIVERSITY OF MIAMI

MEMBERSHIP APPLICATION

CENTER for COMPUTATIONAL SCIENCE

	Date
Name	·
Title	
Organization	·
Department	
Mailing Address	
Business Phone En	mail
1. RESEARCH INTERESTS	
a. What are your major interests in comput	ational research and/or education? (Include additional pages if necessary.)
b. Primary field of research	
2. RESEARCH PROGRAM ALIGNMENT In which Program(s) do you plan to be aligne	d? (Check all that apply.)
PROGRAM	PROGRAM DIRECTOR
☐ Climate & Environamental Hazards	Benjamin Kirtman, PhD
☐ Computational Biology & Bioinformatics	Vance Lemmon, PhD
☐ Drug Discovery	Stephan Schürer, PhD
Big Data Analytics & Data Mining	Mitsunori Ogihara, PhD
Social Systems Informatics	Daniel S. Messinger, PhD
Visualization	Alberto Cairo
☐ Smart Cities	Rodolphe el-Khoury, PhD
3. SHARED RESOURCES	
<u>RESOURCE</u>	RESOURCE DIRECTOR
☐ Advanced Computing	Joel Zysman
☐ Software Engineering	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 ccsadministration@miami.edu

Thank you for your interest in a CCS membership. Upon approval of your application, you will receive a notification letter containing information about your membership. Your photo with link through to your primary online work profile will appear on the CCS membership page