

# Project Cover Sheet

Please Type or Print  
IN 003E (8/00)

<p>1a. Have you had a previous account?  <input type="checkbox"/> If Yes, previous User Name: _____  <input type="checkbox"/> If No, desired User Name: _____</p> <p>1b. Principal Investigator Information:  Name: _____  Address: _____  _____  _____  Fax: _____ Phone: _____  E-mail address: _____</p>	<p>Complete form and forward to:  <b>Account Administration</b>  NASA Ames Research Center  Mail Stop 258-6  Moffett Field, CA 94035-1000  Or FAX to: (650) 604-1777</p> <p>Questions may be submitted to:  NAS User Services, <b>(650) 604-4444, (800) 331-USER</b></p>
2. Project Title: _____	
3. Sponsoring Center: _____	4. National Program Supported: _____
<p>5. Funding Source (Check One):  CoSMO: [ <input type="checkbox"/> ] HPCCP: [ <input type="checkbox"/> ] ESS: [ <input type="checkbox"/> ] DAO: [ <input type="checkbox"/> ]</p> <p>IT: [ <input type="checkbox"/> ] CAS: [ <input type="checkbox"/> ] Other: [ <input type="checkbox"/> ] : _____</p>	<p>6. Allocation Requested:  6a. CPU's Requested: _____  6b. Run Time Memory Requested (MB): _____  6c. C-90 (CPU Hrs): _____  Origin (Node Hrs): _____  6d. Long Term Storage: _____</p>
7. Indicate the Classification of Data based upon NASA's Risk Assessment Criteria (See reverse for definition.) <b>Check One:</b> MSN _____ BRT _____ SER _____ ADM _____ PUB _____	
8. Indicate the Urgency of the Project to return to a production state. The Project is needed within: <b>Check One:</b> 0-2 weeks _____ 3-6weeks _____ 7-12weeks _____ Performed at Alternate site _____ Not Required _____ Other _____	
9. Principal Investigator: Signature: _____ Date: _____	
10. National Program Manager or Designated POC: Name: _____ Signature: _____ Type or Print Phone: _____ Program: _____	
<b>CoSMO Projects Only</b>	
11. RTOP Number: _____ 11a. RTOP Manager Signature: _____	
12. Center Point of Contact: Name: _____ Signature: _____ Type or Print Phone: _____ Center: _____	
13. CoSMO POC: _____ Date: _____	
<b>Account Admin Use Only</b>	
14. GID: _____ 15. C-90 Hrs Allocated: _____ 16. Node Hrs Allocated: _____	
17. Initials: _____ 18. Date: _____	

## Instructions for Project Cover Sheet Completion

1. Prior account / Principal Investigator Information:
  - 1a. Indicate if you have ever had an account, if yes, provide username, if no, supply Account Request Form also.
  - 1b. Each project will identify a single individual to lead the proposed research and to monitor the resources allocated by the CoSMO, IT, HPCCP or CAS Program. Include a complete mailing address, phone number, fax number and e-mail address.
2. Project Title:

The title for each proposed project should be a short (80 characters), unique and descriptive phrase.
3. Sponsoring Center:

Specify the sponsoring center for this project. (JSC-Johnson Space Center, DFRC-Dryden Flight Research Center, JPL-Jet Propulsion Laboratories, MFSC-Marshall Space Flight Center, GSFC-Goddard Space Flight Center, GRC-Glenn Research Center, ARC-Ames Research Center, LRC-Langley Research Center.)
4. National Program Supported:

Specify which national program will sponsoring this research. Aviation Capacity Program (ACP), High Performance Computing and Communications Program (HPCCP), Information Technology (IT), Airframe Systems (AFS), Aviation Operations (AOP), FAA, Flight Research Program (FRP), Propulsion System Program (PRP), Rotorcraft Program (ROT), X33, X34, Airframe Systems (AFS), DOD, Space Science (SSP), Information Power Grid (IPG).
5. Funding Source:

Indicate the source of funding to conduct this project.
6. Allocation Requested:
  - 6a. Provide the maximum number of CPU's required for a typical program run for your research.
  - 6b. The amount of Run Time Memory required (MB) = (1048576 Bytes) stipulating the amount of internal computer memory in megabytes (millions of bytes) needed to run a typical program for your research.
  - 6c. Indicating the number of C-90 CPU hours or Origin 2000 node hours requested.
  - 6d. Any applicable data retention designated for Long Term Storage. The termination of any Long Term Storage, will be accomplished by the Principle Investigator by either contacting the NAS-Control Room group at (650-604-4444); or resigning from the project; or indicating in the field to save for a SPECIFIC period of time.
7. Classification of Data:

Understanding the importance of a complete risk analysis (NASA Procedures and Guidelines, NPG:2810.1), it is essential and critical to the planning process to identify the criticality of the data to ensure a timeliness of supporting the needs of the Center should a catastrophic disaster occur to the NAS complex. Check the appropriate box for fields 8 and 9 as it pertains to the definition noted below:

**MSN:** Mission Information--If the information, software applications, or computer systems in this category are altered, destroyed, or unavailable, the impact on NASA could be catastrophic. The result could be the loss of major or unique assets, a threat to human life, or prevention of NASA from preparing or training for a critical Agency mission.

**BRT:** Business and Restricted Technology Information--This category consists of information that NASA is required by law to protect. It includes information, software applications, or computer systems that support the Agency's business and technological needs. In general, if information in this category should be disclosed inappropriately, the disclosure could result in damage to employees, loss of business for NASA's partners and customers, contract award protests, or the illegal export of technology.

**SER:** Scientific, Engineering, and Research Information--All official NASA information held by NASA employees may be released publicly only in accordance with NASA regulations. This category contains information that supports basic research, engineering, and technology development but is less restricted against public disclosure. Alteration, destruction, unauthorized disclosure, or unavailability of the systems, application, or information would have an adverse or severe impact on individual projects, scientists, or engineers; however, recovery would not impede the Agency in accomplishing a primary mission.

**ADM:** Administrative Information--This category includes systems, applications, and information that support NASA's daily activities, such as electronic mail, forms processing, networking, and management reporting. Administrative Information includes, but is not limited to electronic correspondence, briefing information, project/program status, infrastructure design details, pre-decisional notes, vulnerability descriptions, passwords, and internet protocol addresses. Organizations run various applications—from problem reports to configuration management tools—on administrative IT systems.

**PUB:** Public Access Information--This category contains information, software applications, or computer systems specifically intended for public use or disclosure, such as a public Web site or hands-on demonstrations. The loss, alteration, or unavailability of data in this category would have little direct impact on NASA's missions, but it might expose the Agency to embarrassment, loss of credibility, or public ridicule.
8. Urgency of the Project:

Indicate the urgency the project needs to be returned to a production state. The urgency of the Project will determine should the project be conducted at an alternate site during the recovery period. Indicate Not Rquired for non critical or urgent data that could be required after the Ames Center has been returned to production state or some other preference. Please attach preferences and Point of Contact for technical and resource coordination.

9. Principal Investigator:  
Signature and date of submission of the Principal Investigator.
10. Program Manager or Designated POC:  
Signature of the CoSMO, IT or HPCCP Program Manager or a pre-approved POC for the National Program sponsoring the proposed research. Provide Printed Name, Phone, Signature and associated program title.

**CoSMO Projects Only**

11. RTOP Number:  
Provide an RTOP number to which CPU time for proposed research is associated.
- 11a. Signature of RTOP Manager:  
Signature of RTOP Owner or responsible party. Optionally used by each center POC.
12. Center Point of Contact:  
Signature of pre-approved Center Point of Contact responsible for allocation and maintenance of the CoSMO allocation to enable contact for tracking purposes.
13. CoSMO POC Signature:  
Signature of the CoSMO Office POC which is required to enable processing of CoSMO requests.

**Account Admin Use Only**

Fields 14 through 18 to be filled out by the User Interface Coordinator.