





## Resource Registration Request<sup>1</sup>

X	ew Change Request Re	moval
	Organization	
Name:	Istituto Nazionale di Fisica Nucleare	
Organization sit	URL: http://www.infn.it	
Service Name:	GISELA Science Gateway	
Service URL <sup>2</sup> :	http://gisela-gw.ct.infn.it/service	
Service access		
Web page URL⁴	http://gisela-gw.ct.infn.it	
EntityID⁵:	https://gisela-gw.ct.infn.it/shibboleth	
	Attributes <sup>6</sup>	
URI₁:	urn:mace:dir:attribute-def:mail (R)	
URI₂:		
URI₃:		
URI₄:		
URI₅:		
	Technical Contacts <sup>7</sup>	
Name:	Prof. Roberto Barbera	
Position:	INFN representative in the GISELA project	
Address:	INFN - Sezione di Catania, Via S. Sofia 64, 95123 Catania	
Please send tw copy to idem@: NOTE: if this is Partner. The URL of a pi The URL of the (eg. user info, P Unique identifie Specify the attri Necessity and	e first service registration you must also fill the form for joining the Federation as a e which describes the service and its intended audience. e from which is possible to access the service eb page as requested by NdP (Norme di Partecipazione) and specified in ST (Spervacy Policy) which identifies each Resource in IDEM Federation to asked by the resource, specifying if it is required (R) or optional (O). Eage of not anonymous attributes or of attributes not required by the Federal Privacy Policy web page.	a Member or as a cifiche Tecniche)



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E 24 HOV. 2011	
CONSORTIUM GARR	Resource Registration Request v
roberto.barbera@ct.infn.it	
+39 349 3762671	
Dr. Giuseppe Andronico	
Responsible of the IT Service at the INI	FN Division of Catania
INFN – Sezione di Catania, Via S. Sofia	a 64 – 95123 Catania
giuseppe.andronico@ct.infn.it	
-39 095 3785304	186
credentials-admin@ct.infn.it	
h the purpose of the Federation. End Us	sers' attributes requested by the ser

The service is in compliance with vice are adequate, relevant and not excessive in relation to its characteristics.

Date: 24/11/2011

Support Email8:

Email: Phone:

Name: Position: Address: Email: Phone:

Applicant's Signature9

## Acceptance by Consortium GARR

Date:	
On behalf of Consortium GARR	

Email address operating also during the absence of the Technical Contact.

Signature of the "Referente Organizzativo" or of the Organization's Legal Representative The signature must be readable or Name and Surname in block capitals must be written down. In case of a "change request", a signature of the technical contact person or of the Technical Representative is sufficient.