## Corporation for Research and Educational Networking Application for the CREN Certificate Authority Service (Form 2.0)

## **Part I: Identification of Institutional Contacts**

**Institution Information** 

Important terms to know: MR= Member Representative | CAEO = Certificate Authority Executive Officer | ICATC= Certificate Authority Technical Contact

**Part I** of the Certificate Authority application process is the identification of the institution's contacts for this service. **Part II** of the application process is the agreement authorization from the campus executive officer (CAEO) for the Certificate Authority Service. The Member Rep completes Part I with the names of the institution's contacts, obtains the signature of the CAEO on Part II, and then returns the application to the CREN office by fax. The CREN office then verifies the contact information.

Address of Organization:	
City	StateZipCount
Main PhoneDo	omain Name
Organizational Unit (If Applicable)	
Membership Representative (MR):	
Name	Institution
Mailing address:	Title and Dept
City, State, Zip Code:	Country, if not US.
Office Phone ( )	FAX Number ()
E-mail Address:	
<u>Certificate Authority Executive Officer (CAEO):</u>	
Name	Institution
Mailing address:	Title and Dept
City, State, Zip Code:	Country, if not US.
Office Phone ( )	FAX Number ()
E-mail Address:	
Certificate Authority Technical Contact (ICATC):	
Name	Institution
Mailing address:	Title and Dept
City, State, Zip Code:	Country, if not US.
Office Phone ( )	FAX Number ()
E-mail Address:	

## **Part II: Agreement Authorization**

**Part II** of the application process is the agreement authorization by the Certificate Authority Executive Officer (CAEO). This authorizes that the institution becomes a subscriber.

**Agreement:** I certify that the above-named organization wishes to subscribe to CREN's Certificate Authority Service. I also certify that the above-named institution has procedures in place that appropriately protects the institution's private key for the campus certificate authority service.

I understand that CREN is providing this top level Certificate Authority Service as a benefit to its members and to the higher education community to facilitate inter-institutional resource sharing and access to other services. CREN's CA practices are governed by the CREN Certification Practices Statement (CPS) available at www.cren.net. I acknowledge that the Public Key Infrastructure (PKI) is an evolving technology and that CREN's service is part of this evolving infrastructure.

I understand that the signing of this form is part of the practice required for the organization to receive a CREN institutional certificate.

Date		-
Signature		
Title	(University Business Officer)	
Name (Print)		

Please fax this signed application to CREN at 202-293-2853. If you have any questions, please call us at 202-331-5366. After the application has been received and reviewed CREN will notify the Certificate Authority Technical Contact to proceed to Part III which will initiate the digital certificate request process.

<u>Part III: Certificate Request</u> The CREN CA System Administrator will send email to the Certificate Authority Technical Contact and set up a secure communication channel for the digital certificate request. Detail on all the steps in this process can be found at <a href="http://www.cren.net">http://www.cren.net</a>.