

University Software Program

Request for [Cadence® OnCloud Platform](#)

Please have a professor sign and submit this request to univ_approval@cadence.com

| Packages | Terms of Use | Fees |
|-----------------------|--|--------|
| Multiphysics Analysis | each user will get 30 hours of Cloud access to be used in 6 months | waived |
| PCB Hardware Expert | each user will get 30 hours of Cloud access to be used in 6 months | waived |
| CFD Analyst | each user will get 30 hours of Cloud access to be used in 6 months | waived |

EDUCATIONAL INSTITUTION ("UNIVERSITY") INFORMATION

University Name:

University website URL:

Department:

Street:

City:

State/District:

Postal Code:

Country:

PRIMARY PROFESSOR CONTACT

Professor Name:

Phone:

University Email:

Professor's signature:

ADDITIONAL PROFESSOR CONTACT

Additional Professor Name:

Phone:

University Email:

ACCOUNTING CONTACT

Purchasing Name:

Phone:

University Email:

Please attached a copy of your tax-exempt certificate