

**DHS PREDICT Sponsorship Letter Form
Cover Sheet**

1. Department Name: Department of Homeland Security
2. Component/ Agency Name: Science and Technology Directorate
3. OMB Control Number: 1640-New
4. Expiration Date: TBD (Three years from approval date)
5. Agency Form Number:
6. Name of Form: Sponsorship Letter
7. Purpose of Form: Sponsorship letter that allows organizations to request that the organization's personnel's applications be considered to join the PREDICT community
8. How to submit: Sign and fax to the PREDICT Coordinating Center, RTI International, Attn: Renee Karlsen, 866.835.0255 (toll free).

**READ THESE INSTRUCTIONS CAREFULLY
BEFORE PROCEEDING**

Thank you for your interest in joining the PREDICT community. In order for your application to be considered you must have your supervisor or other appropriate manager in your organization execute the attached Sponsorship Letter. The person signing the letter should have authority to act on behalf of your organization. Please be sure to provide these instructions along with the letter template when requesting a signature. The completed and signed letter must be received by the PREDICT Coordinating Center before your application for an account as a researcher can be considered.

Directions:

1. You will need to print this letter on your institution's letterhead. You may do this in two ways:
 - a. Cut and paste the text of the letter into your word processing program so you can fill in the information requested using your institution's letterhead. Once you have inserted the information, you can save and print the letter. Note: you will need to adjust the formatting for the word processing program you are using.
 - b. Fill in the form within the PDF. The top margin is about 1.5 inches to accommodate letterhead. Print the letter using your institution's letterhead.
2. Fill in appropriate names, dates, and other information where indicated with the requested information. Do not omit any of the requested information.
 - a. Use one copy of the letter to cover multiple researchers, if needed.
 - b. Optional: Insert the prefix appropriate to the researcher(s) (Dr., Ms, Miss, Mrs., Mr.)
 - c. Spell out the name of your company, organization, school and/or department. **Do not abbreviate.**
3. Print out the letter.
4. Sign and fax to the PREDICT Coordinating Center, RTI International, Attn: Renee Karlsen, **866.835.0255 (toll free)**.

Questions regarding your application may be directed to the PREDICT Coordinating Center, at predict-contact@rti.org

An agency may not conduct or sponsor an information collection and a person is not required to respond to this information collection unless it displays a current valid OMB control number and an expiration date. The control number for this collection is 1640-XXXX and this form will expire on XX/XX/XXXX. The estimated average time to complete this form is 60 minutes per respondent. If you have any comments regarding the burden estimate you can write to Department of Homeland Security, Science and Technology Directorate, Washington, DC 20528

Today's Date

RTI International
Attn: Renee Karlsen
PREDICT Coordinating Center
PO Box 12194
Research Triangle Park, NC 27709-2194

SUBJECT: Application for access to PREDICT Data.

Dear Ms. Karlsen:

I am writing you in regard to an application for access to data under the PREDICT project for which RTI is serving as the PREDICT Coordinating Center (PCC). I understand that a letter of support from a Sponsoring Institution is one of the required elements of a successful application for access to PREDICT data, and this letter is meant to fill that purpose.

By this letter, I am confirming on behalf of myself and my organization that: (Fill in **all** information and sign below):

1. This letter is being sent on behalf of the following staff (Applicant(s)):

Full Name	Department/ Organizational Unit	Years with Sponsoring Organization	Title	Signature Authority (Y/N)	Role in Proposed Research	Research	
						Start Date	End Date

2. Applicant(s) are currently affiliated with our organization, and serve(s) in the Department or Organizational Unit listed in Section 1.
3. Applicant(s) is (are) an employee(s) in good standing with our organization.
4. Applicant(s) has (have) a legitimate need for PCC Data, owing to their Position within their department and role in the proposed PREDICT research, as spelled out in Section 1.
5. Applicant(s) can be anticipated to have a need for this data until this (or similar legitimate work approved by the PREDICT Application Review Board) is completed, according to estimated dates listed in Section 1.
6. I or my successor in my role will inform PCC should any of the Applicants listed in Section 1 leave our institution or otherwise have changed circumstances calling into question their need for the PCC Data or the appropriateness of their having access to the Data.

As a member of the cyber-security research community, I appreciate the importance of this work and am delighted to assist PREDICT disseminate these data and results. Should you have need for further information, please contact me.

Very truly yours,

Print Name: _____

Signed: _____

Title,
Position: _____

Email _____ Phone _____