



Department of Homeland Security
Science and Technology Directorate

Paperwork Reduction Act (PRA)
Collection Instrument Coversheet

Version: 2.0
Last Modified: January 12, 2010

THE ATTACHED MATERIALS CONTAIN DEPARTMENT OF HOMELAND SECURITY INFORMATION THAT IS "FOR OFFICIAL USE ONLY", OR OTHER TYPES OF SENSITIVE BUT UNCLASSIFIED INFORMATION REQUIRING PROTECTION AGAINST UNAUTHORIZED DISCLOSURE. THE ATTACHED MATERIALS MUST BE HANDLED AND SAFEGUARDED IN ACCORDANCE WITH DHS MANAGEMENT DIRECTIVES GOVERNING PROTECTION AND DISSEMINATION OF SUCH INFORMATION.

AT A MINIMUM, THE ATTACHED MATERIALS WILL BE DISSEMINATED ONLY ON A "NEED-TO-KNOW" BASIS AND WHEN UNATTENDED, MUST BE STORED IN A LOCKED CONTAINER OR AREA OFFERING SUFFICIENT PROTECTION AGAINST THEFT, COMPROMISE, INADVERTENT ACCESS, AND UNAUTHORIZED DISCLOSURE.

Revision History

Date	Version	Description	Author
	1.0	Initial Delivery	
January 12, 2010	2.0	Added coversheet	Jeffery Harris

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: DHS FORM #####
6. Name of Form: **Cyber Forensics Electronic Technology Clearinghouse (CyberFETCH) Registration Form**
7. Purpose of Form: **To collect the necessary information required to create a user account and password needed to gain access to the CyberFETCH website.**
8. How to submit: **Submit online at <http://www.cyberfetch.org/?q=user/register>**


Puzzle IQ Quiz

User account | CyberFETCH

http://64.9.81.7/?q=user/register

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Home > User account

Request a CyberFETCH Account

OMB Control No. 1640-XXXX
Expires XX/XX/XXXX

* - Denotes a required field

User account

Create new account Log in Request new password

In order to access this secure portal, please fill in the following registration form. The information contained in this form will be used to determine your eligibility for access to the portal. This registration form will take approximately 15 minutes to complete. Account Request Note: Site membership is open to U.S. Persons from Government, Law Enforcement, Private Sector and Academia (Faculty & Graduate Students) working in the varying fields of digital forensics. NOTICE: The information contained in this application will be used to populate your user profile and will be viewable by other CyberFETCH users. The sponsor information will only be available to CyberFETCH staff and will not be viewable by other users. CyberFETCH will not disclose personal information to third parties for commercial marketing.

Account information

E-mail: *

A valid e-mail address. All e-mails from the system will be sent to this address. The e-mail address is not made public and will only be used if you wish to receive a new password or wish to receive certain news or notifications by e-mail. If you do not have an official email address then you should apply to the FBI's Law Enforcement Online (LEO) service. LEO is a secure, internet-based communications portal that will accept and approve members affiliated with the criminal justice system, intelligence communities, military personnel and government agencies associated with infrastructure protection of the United States. When approved you will have a .gov email address as part of your membership which you can use to apply with us. Go to www.leo.gov to apply.

Personal information

First name: *

Enter your first name.

Last name: *

Enter your last name.

I am a US Person
By checking this box I am certifying that I am a US person. A natural person who is lawful permanent resident as defined in 8 U.S.C. 1101 (a)(20) or who is a protected individual as identified by 8 U.S.C. 1324b(a)(3). It also means any corporation, business association, partnership, society, trust, or any other entity, organization or group that is incorporated to do business in the U.S. It also includes any governmental (federal, state, local), entity.

Job title: *

What is your job title?

Organization: *

Which organization or department are you a part of?

Affiliation: *

Academia

What type of organization are you affiliated with?

Phone Number: *

Organization phone number.

Address 1: *

Your mailing address.

Address 2:

City: *

State: *

Zip: *

User account | CyberFETCH

http://www.cyberfetch.org/?q=user/register

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Job title: *

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City: *

State: *

Zip: *

Sponsor Information

First name: *

Name of the person sponsoring your application. The content of this field is kept private and will not be shown publicly.

Last Name: *

Sponsor's last name The content of this field is kept private and will not be shown publicly.

Job Title: *

Sponsor's job title. The content of this field is kept private and will not be shown publicly.

Organization: *

Organization the sponsor belongs to. The content of this field is kept private and will not be shown publicly.

Organization Phone number: *

Main phone number for the sponsor's organization. The content of this field is kept private and will not be shown publicly.

Email Address: *

Sponsor's email address. The content of this field is kept private and will not be shown publicly.

[Create new account](#)

Privacy Act Notice: Authority to Collect This Information: The Homeland Security Act of 2002 [Public Law 1007-296, §302(4)] authorizes the Science and Technology Directorate to conduct "basic and applied research, development, demonstration, testing, and evaluation activities that are relevant to any or all elements of the Department, through both intramural and extramural programs." In exercising its responsibility under the Homeland Security Act, S&T is authorized to collect information, as appropriate, to support R&D related to improving the security of the homeland. Principal Purposes: DHS will collect and use this information to provide an online, professional connection and collaboration environment (via communities of practice) for First Responders. Routine Uses and Sharing: In general, DHS will not use this information for any purpose other than the purpose stated above. However, DHS may release this information of an individual on a case-by-case basis as described in the DHS/ALL-002 and DHS/ALL-004 System of Records Notice (SORN), which can be found at: www.dhs.gov/privacy Disclosure: You may opt not to provide the requested information or to provide only some of the information DHS requests. If you opt not to provide some or all of the requested information, DHS may not be able to process your registration.

PRA Burden Statement: 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 30 minutes per respondent. If you have any comments regarding the burden estimate you can write to Department of Homeland Security, Science and Technology Directorate, 245 Murray Lane, Washington, DC 20528.

DHS Form: 10XXX

Drupal Commons social business software

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Done

User account | CyberFETCH

http://www.cyberfetch.org/?q=user/register

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Job title: *

What is your job title?

Organization: *

Which organization or department are you a part of?

Affiliation: *

- Academia
- Academia
- Communication Carriers (ISP, Telecomm, Data Comm, Cable)
- Computer/Network Consultant
- Manufacturing-Hardware/Software
- Retailer/Distributor/Wholesaler (computer-related)
- Service Provider (MSP, BSP, ASP, ESP, Web Hosting)
- Advertising/Marketing/PR/Media (Publishing, Broadcasting, Online)
- Aerospace/Defense Contractor
- Business Services/Consultant
- Finance/Banking/Accounting
- Government - Federal (including Military)
- Government - State/Local
- Healthcare/Medical/Pharmaceutical/Bio-Tech
- Insurance/Real Estate/Legal
- Mining/Oil/Gas
- Law Enforcement - Federal
- Law Enforcement - Local
- Law Enforcement - State
- Transportation/Utilities (Energy, Water, etc)
- Travel/Hospitality/Entertainment/Recreation

Zip: *

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Done