

REGISTRATION FORM

GSFC-JPL Quality Mission Software Workshop - April 2001

Please complete this form and return to Mary A. Floyd, Westover Consultants, Inc., RS Information Systems, 7833 Walker Drive, Suite 560, Greenbelt, MD, 20770 or via facsimile at: 301-345-4659 by **April 7, 2001**.

NAME: _____

AFFILIATION: _____

STREET ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: _____ FAX: _____

EMAIL: _____

Please indicate which sessions you wish to attend? (Check one per time period):

Working Sessions (Some sessions are held in parallel)

- 1. Roles and organizational models for flight S/W projects - Tues., April 24, 10AM - 1PM.
- 2. Generic, High Fidelity FSW Test-bed Capabilities - Tues., April 24, 10AM - 1PM.
- 3. Spacecraft fault protection S/W Implementation Strategies - Tues., April 24, 2PM - 5PM.
- 4. Validation Testing and Stress Testing of Flight Software - Wed., April 25, 9:30 AM - 1PM.
- 5. CMM - Process Improvement for CMM level 3 and beyond - Wed., April 25, 9:30AM - 1PM.

Informational Sessions (3)

- 1. MCO/MPL Findings - Wed, April 25, 2PM - 2:30PM.
- 2. NASA S/W Working Group Report - Wed., 2:30PM - 3PM.
- 3. Upgrade of Legacy Systems - Wed., April 25, 3:15PM - 3:45PM.

If you are a NASA/GSFC Employee, do you wish to be a passenger on a NASA van to travel to Williamsburg? YES NO

Would you be willing to drive the van? YES NO

Do you require any assistance in accordance with ADA regulations?

NAME: _____

SPECIAL EVENT REGISTRATION:

"Remember Me"	\$10.00 per person	No. of people _____	\$ _____ (total due)
Tavern Dinner	\$35.00 per person	No. of people _____	\$ _____ (total due)
		Total amount Due	\$ _____

METHOD OF PAYMENT:

____ Check or Money Order payable to **RS Information Systems, Inc.**

____ Credit Card # _____ Exp. Date _____

Card Type: Visa _____ Mastercard _____ AMEX _____ (*We do not accept Diners*)

Name on Credit Card _____

Signature of Cardholder _____