

Declaration form for Wi-Fi Connectivity Staff Registration

1.General Information		
Name:		
Staff ID No:		Sex: Male / Female
Staff Particulars:	Teaching / Non- Teaching / Visiting Faculty	
Designation:		
Department/Centre/Section:		
Campus:		
Contact Details:	Intercom no: Landline no:	Mobile no:
E-mail ID:		
2.Technical Information		
Type of Device:	Laptop	
Make & Model:		Serial no:
Mac / Physical Address:		
Operating System:	Windows/Unix/Mac/Linux/others(specify)	

I hereby declare that the above information given by me is true and correct. I accept all the terms and conditions laid down by AU and hereby take-up the responsibility for any violation that would be caused by my username.

Date:

Signature of the Staff

Certified by: Head of the Department / Director Signature with Date and seal

- Enclose Xerox copy of the Staff ID-Card

For Office Use Only

User Name:	Password:	
IP assigned: DHCP / Specific IP	Expiry: Never / Specific date	
Verified by System Administrator Signature with Date:		
Approved by Director-Computer Centre Signature with Date:		
Status of account with Date:	Opened on:	Closed on: