## Declaration form for Wi-Fi Connectivity <u>Student Registration</u>

1.General Information					
Name:					
Roll no / ID No:	Sex: M		ale / Female		
Degree Course / Ph.D.:			Category: Full Time / Part Time		
Faculty / Guide name:			J	•	
Course Duration:	From:	From: To:			
Campus:			· ·		
Contact Details:	Intercom no:		Mobile no:		
	Landline no:				
E-mail ID:					
2.Technical Information					
Type of Device:	Laptop				
Make & Model:			Serial no:		
Mac / Physical Address:					
Operating System:	Windows/Uni	Jnix/Mac/Linux/others(specify)			
Date:		Signature of the Student			
•	of the Departmen	t / Director Signaturent ID-Card	re with Dat	te and seal	
*********	********	*******	******	*******	
	For Office	e Use Only			
User Name:		Password:	Password:		
IP assigned: DHCP / Specific IP		Expiry: Never /	Expiry: Never / Specific date		
Verified by System Admir					
Signature with Date:					
Approved by Director-Cor	nputer Centre				
Signature with Date:					
Status of account with Date:		Opened on:		Closed on:	