

COMPUTING CENTRE NOORUL ISLAM UNIVERSITY

KUMARACOIL, THUCKALAY,
KANYAKUMARI DIST

DECLARATION FORM FOR WI-FI CONNECTIVITY

STAFF REGISTRATION

1.General Information		
Name		
Staff ID		Sex : Male / Female
Staff particulars	Teaching / Non Teaching	
Designation		
Department / Centre / Section		
Email id		
Contact	Intercom No:	Mobile / Landline
2.Technical Information		
Type of Device	Laptop/Palmtop/Mobile/Other (Specify)	
Make, Model & Serial No.		
MAC Address		
Operating System	Windows/Unix/Mac/Dual/Others (Specify)	

I hereby declare that the above information given by me is true and correct.

Date :

Signature of the Staff

Head of the Department

Office Use

Whether Wi-Fi access permitted	Yes / No
Remarks	

Technical Staff

Director (CC)