

COMPUTING CENTRE

NOORUL ISLAM CENTRE FOR HIGHER EDUCATION

KUMARACOIL, THUCKALAY,
KANYAKUMARI DIST

DECLARATION FORM FOR Wi-Fi CONNECTIVITY / INTERNET CONNECTIVITY STUDENT REGISTRATION

1.General Information		
Name		
Register Number		
Sex	Male/Female	Category: FT/PT
Branch		Degree: UG / PG / RS
Course Duration	From:	To:
Address		
Contact	Mobile No:	Email ID:
2.Technical Information		
Type of Device	Laptop/Palmtop/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 Student

Head of the Department

*Enclose Xerox Copy of the Student ID – Card.

Office Use

Whether Wi-Fi access permitted	Yes / No
Username	
Password	

Technical Staff

Director (CC)