

B.B. DIKSHIT LIBRARY ALL INDIA INSTITUTE OF MEDICAL SCIENCES

New Connection / Change of Device

Application for Wi-Fi Connection (within Library)

1.	Name of User			
2.	Designation/Course			
3.	Department			
4.	Address:			
5.	Mobile No.			
6.	Email ID			
7.	Make/Model No. of Laptop/Mobile/i-pad			
8.	MAC Address of the wireless			
Note: Kir	card add provide photocopy of your value.	alid Identity Card issued by All	MS	
Please no	n. I understand any violation in this re te applicants can register only <u>ONE</u> o utomatic closing the accessibility. gnature	device. Any violation of registering	more than one device, would Signature with Seal	
		ŀ	lead of the Department	
•••••	Fo	or Office use only		
Registration No.		Registration Da	Registration Date:/	
		Valid upto:		
		Status:		
Activated by		Verified by		
Rakesh F D.E.O. (0	Rawat / Santosh Kumar Grade-A) / D.EO.(BECIL)	Neetu Priya Librarian (Gd-III)	Jahangir Khan Officiating In-charge and Librarian Grade-I	