



COMPUTER FACILITY
ALL INDIA INSTITUTE OF MEDICAL SCIENCES

APPLICATION FOR WIRELESS CONNECTION FOR HOSTEL RESIDENTS OF AIIMS

1.	Name of the Student :-	
2.	Course of Study:-	
3.	Years of Study:-	From : To:
4.	Hostel No.:-	
5.	Room No.:-	
6.	Location :-(MM/TC/RPC/FTA/LH etc.)	
7.	Mobile No.:-	
8.	Email ID:-	
9.	Laptop / Desktop :-	
10.	Make of the Laptop / Desktop :-	
11.	MAC address of the Wireless Card:-	
12.	Serial No. of the Laptop / Desktop :-	

Note:- Kindly provide the following documents along with this form.

1. **Photocopy of valid AIIMS Identity Card**
2. **Photocopy of Hostel Allocation letter from AIIMS.**

I, _____, state that the above particulars are true and undertake to use the Wireless Connectivity for Academic and Research purposes only, and I will not tamper with the Network settings and related configuration settings of the Network either by self or any other person through my computer or room. I understand any violation in this regard is punishable under IT Act of Govt. Of India.

Signature of the Student

Registrar's Office, Verified item no. 1 to 3 and forwarded.

Forwarded & verified by Hostel Superintendent for item no. 4 to 6.

Prof. In Charge, Computer Facility.