



Date: 30-05-2016

Notice

As per direction of Hon'ble Vice-Chancellor, this is for information to all Faculty members, Officers, Staff, Research Scholars, Hostel Boarders that as per approval of the authority the WI-FI Access for LAN and Internet facilities (available in 1st Phase WI-FI Zone) will be provided to all the users communities.

As per Access Policy, the WI-FI devices (Smartphone, Laptop (Official and Personal) and any other WI-FI devices)) are to be registered for access permission. Users are requested to fill up individual form for individual WI-FI devices.

The filled in application form forwarded through the Appropriate authority is to be submitted to the Office of Computer Centre at the earliest.

Co-operation from all users are highly solicited.

Sd/-

(Sunil Ch. Mallik)

Director, Computer Centre

Note:

For MAC Address of SmartPhone : Go to setting-> About Mobile-> Status-> see the MAC Address

For Laptop MAC-> Go to Dos Command Prompt-> type Getmac

Enclo.:

1. Registration form for Faculty members, Officers, Staff, Research Scholar
2. Registration for Hostels Boarders



REGISTRATION FORM
[For Residential Students(Boarders)]
For Network & WI-FI Access for Hostels

1.General Information:

| | |
|--|-----------------------|
| 1. Name of the Applicant: | |
| 2. University ID Card No. | |
| 3. Department with semester and roll no. | |
| 4. Contact No. | |
| 5. Email ID | |
| 6. Course Duration | From: _____ To: _____ |
| 7. Residential Address in University (HOSTEL) including room no. | |

2. Access Device details:

| | |
|--------------------------------|-------------------------------------|
| 1. Type of Device (Pl. Tick) | Laptop /Tablet/Mobile /Other |
| 2. Make, Model and Serial No. | |
| 3. MAC / Physical Address | |
| 4. Operating System (Pl. Tick) | Windows / Linux/ Mac/Android/ other |
| 5. Operating System Version: | |

3. Declaration:

I hereby declare that the above information is true to the best of my knowledge and belief. I further declare that I accept all the terms and conditions and policies of VU WIFI and I understand that I shall be held responsible for any violation caused by my username. I shall keep my username and password secret and shall not share it with anybody.

Signature of the Applicant
Date:

Forwarded by HOD _____ Hostel Superintendent

For Office Use Only

| | | |
|---------------------------------|---------------|------------|
| Internet Access Account details | Username: | Password: |
| IP Address assigned DHCP/Static | DHCP/ Static- | Validity: |
| Status of Account with Date | Opened on: | Closed on: |

APPLICANT'S copy for record [VU- WIFI Internet access]

| | | |
|---------------------------------|-----------|-----------|
| Name of Account Holder | | |
| Internet Access Account details | Username: | Password: |
| SSID Allocated | | |
| Account Valid Upto | | |

Documents to be submitted with this form: University ID card (self attested Xerox)
****Keep this document with you only in safe custody**

Director, Computer Centre

Verified by the Office of the PG Secretary



COMPUTER CENTRE
VIDYASAGAR UNIVERSITY ** Midnapore – 721 102
West Bengal

REGISTRATION FORM
[For Faculty/Officers/Staff/Research Scholar]
For Network & WI-FI Access from Campus

1. General Information:

| | |
|--|---------|
| 1. Name of the Applicant | |
| 2. Department | |
| 3. Designation | |
| 4. Contact No. | Mobile: |
| 5. Email ID | |
| 6. Residential Address in University (IF Staying in University Campus) | |

2. Access Device details:

| | |
|--------------------------------|-------------------------------------|
| 1. Type of Device (Pl. Tick) | Laptop /Tablet/Mobile /Other |
| 2. Make, Model and Serial No. | |
| 3. MAC / Physical Address | |
| 4. Operating System (Pl. Tick) | Windows / Linux/ Mac/Android/ other |
| 5. Operating System Version: | |

3. Declaration:

I hereby declare that the above information is true to the best of my knowledge and belief. I accept all the terms and conditions and policies of VU WIFI and I understand that I shall be held responsible for any violation caused by my username/device MAC. I shall keep my username and password secret and shall not share it with anybody.

Signature of the Applicant

Date:

Forwarded by HOD

For Office Use Only

| | | |
|---------------------------------|---------------|------------|
| Internet Access Account details | Username: | Password: |
| IP Address assigned DHCP/Static | DHCP/ Static- | Validity: |
| Status of Account with Date | Opened on: | Closed on: |

APPLICANT'S copy for record [VU- WIFI Internet access]

| | | |
|---------------------------------|-----------|-----------|
| Name of Account Holder | | |
| Internet Access Account details | Username: | Password: |
| SSID Allocated | | |
| Account Valid Upto | | |

Documents to be submitted with this form: University ID card (self attested Xerox)

**Keep this document with you only in safe custody.

Director, Computer Centre

Verified by the Establishment Section (Emp.ID)