

## SHRI MATA VAISHNO DEVI UNIVERSITY

Sub Post Office, Katra -183230 Ph. # 01991-285535, 285634 Fax : 01991-285573

## **Network Centre**

## Application Form for Internet Connectivity through LAN/ Wi fi for Students

Name	
Enrollment No	Affix Attested
Department/School	Photo
Semester	
Permanent address	
University Hostel Address	
Laptop / System Model & Serial No. (if any)  1. MAC ID of LAN Card  2. MAC ID of Wi-Fi Card	
Email Id	
Mobile No.	
Signature	
Recommended & forwarded by Warden	
Recommended & forwarded by Director of School	
D	Declaration
son/daughter of	student of SMVDU will use SM
SMVDU internet policy and will not indulge in	ly. I hereby abide by the rules and regulation activities like hacking/ using proxy servers/ to dentials with anyone and will be fully responsible
Signature:	Date:
For Netwo	ork Centre use
SMVDU/NC/ /	Dated:
Username:	Password :

## **Instructions: -**

- 1. Do not share username & password with anyone.
- 2. Network centre will be providing internet connection only as per recommendations from Deans /Directors / Head of Sections.
- 3. The user for whom the account was created is responsible for the security of the account and all actions associated with its use.
- 4. **Stolen passwords:** Often the account owner is the first person to detect unauthorized use of their account. If this occurs, please notify to the Network Centre.
- 5. Type **ipconfig** /all in command prompt to see the MAC ID of Network Card.
- 6. Attach one photocopy of your identity card / photo graph with this form.