



UNIVERSITY COLLEGE OF ENGINEERING VILLUPURAM
(A constituent college of Anna University Chennai)
Villupuram – 605103.

S. No: _____

REGISTRATION FORM FOR Wi-Fi CONNECTIVITY (For student use only)

Name : _____

Register Number * : _____ Degree (UG/PG/Ph.D) _____

Department : _____

Batch (Ex 2011-2015): _____

System Information: (HP/Dell/any other specify) _____ O.S. : _____

System Model Number and Serial Number: _____

MAC Address of the System :						
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(Ex : 78-2B-CB-8F-89-4C)

(Note: Steps to get the MAC address: **Windows**: 1. Go to Start->Run 2. Type CMD and press Enter key 3. In the prompt type: "ipconfig /all" 4. Note down the "Physical Address for Wireless LAN Adapter" as the MAC address. **Linux**: 1. Launch the Terminal by hitting "CTRL+ALT+T" keys simultaneously 2. Type "ifconfig | grep HWaddr" and press Enter key)

Phone / Mobile No. : _____

Email ID : _____

DECLARATION

The above mentioned system solely belongs to me. I commit that I will use this facility for **Academic purpose** only and I will not share my account with anybody.

Student

Head of the Department

Name : _____

Name : _____

Signature : _____

Signature : _____

Date : _____

Date : _____ Dept. Seal : _____

* Enclose Photocopy of the Student ID – Card



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S. No: _____

REGISTRATION FORM FOR Wi-Fi CONNECTIVITY (For Staff only)

Name : _____

Designation : _____

Department : _____

System Information: (HP/Dell/any other specify)_____ O.S. : _____

System Model Number and Serial Number: _____

MAC Address of the System :						
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(Ex : 78-2B-CB-8F-89-4C)

(Note: Steps to get the MAC address: **Windows**: 1. Go to Start->Run 2. Type CMD and press Enter key 3. In the prompt type: "ipconfig /all" 4. Note down the "Physical Address for Wireless LAN Adapter" as the MAC address. **Linux**: 1. Launch the Terminal by hitting "CTRL+ALT+T" keys simultaneously 2. Type "ifconfig | grep HWaddr" and press Enter key)

Phone / Mobile No. : _____

Email ID : _____

DECLARATION

The above mentioned system solely belongs to me. I commit that I will use this facility for **Academic purpose** only and I will not share my account with anybody.

Staff

Head of the Department

Name : _____

Name : _____

Signature : _____

Signature : _____

Date : _____

Date : _____ Dept. Seal : _____