

INST Mohali
(Form for Internet Access-ID)

First Name: _____ Middle Name: _____ Last Name _____

Registration No. /P.F. No. _____

Designation (if employee) _____

Department/Research Advisor: _____

Email ID: _____

Mobile Number: _____

Signature of the user

Head of Office/Supervisor/Research Advisor's recommendations

I hereby approve the above named person to have an official internet ID.

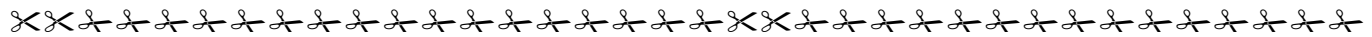
Signature _____

Date _____

For System Administrator / Computer Service In-charge use only

Login ID given _____

Login created by: _____ Date: _____



User Copy

Login ID given _____ Password _____

Date: _____

(System Administrator / Computer Service In-Charge)