



Date:

Wi-Fi Connection Form

(For Supporting Staff only)

Add Passport size
picture here

All fields are mandatory

Name:	:
Designation	:
Department/Office	:
Faculty Name	:
Mobile No	:
Personal email address (if any)	:

I hereby take the full responsibility of the authenticity of the information provided in this form. The administration of the Sylhet Agricultural University or the ICT Cell shall not be held responsible if any of the aforementioned information is found fraud/incorrect.

Signature of applicant
Date:

Signature of the Chairman/Head
of Office/Section with seal

-----Office Use Only-----

Received By
ICT Cell, SAU

Date:

Approved By
Chairman
ICT Cell, SAU

Date:

Created By
ICT Cell, SAU

Date: