

COMPUTER CENTRE ALLOTMENT FORM

| Name o | f Staff/Faculty: | | | |
|--------------------------------------|------------------|----------|-----------------|---------|
| Designa | ntion: | | | |
| Departn | nent/Section: | | | |
| S.No. | Description of | Location | Quantity | Date of |
| | Asset/Consumable | | | Issue |
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| Signature of Staff/Faculty with date | | | Technical Asst. | |
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| System Ac | łmin/TO | | | |
| System 1 K | | | | |
| System Ac | lmin/10 | | | |

FIC-CC